

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F71332

FILED
Mar 05, 2007
Secretary of State

Entity Name: CORPOREX PROPERTIES OF TAMPA, INC.

Current Principal Place of Business:

100 E RIVERCENTER BLVD SUITE 1100
COVINGTON, KY 41011

New Principal Place of Business:

Current Mailing Address:

C/O CORPORATE SECRETARY
P.O. BOX 75020
CINCINNATI, OH 452750020

New Mailing Address:

FEI Number: 61-1025842 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATE SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: BUTLER, WILLIAM P
Address: 100 E RIVERCENTER BLVD, STE 1100
City-St-Zip: COVINGTON, KY 41011

Title: D () Delete
Name: BANTA, THOMAS
Address: 100 E RIVERCENTER BLVD SUITE 1100
City-St-Zip: COVINGTON, KY 41011

Title: AS () Delete
Name: BUTLER, MARTIN
Address: 50 E RIVERCENTER BLVD SUITE 1400
City-St-Zip: COVINGTON, KY 41011

Title: S () Delete
Name: CASTO, MELISSA
Address: 100 E. RIVERCENTER BLVD., SUITE 1100
City-St-Zip: COVINGTON, KY 41011

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MELISSA CASTO

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03/05/2007

Electronic Signature of Signing Officer or Director

_____ Date