

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F71332

FILED
Jun 05, 2008
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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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 (X) 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 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: THERESE L. LUSBY

DIRE

06/05/2008

Electronic Signature of Signing Officer or Director

_____ Date