FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT# J94767 Associates at tampa Bay, Inc

May 14, 2003 8:00 am Secretary of State 05-14-2003 90142 013 ***558.75

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Daytime Phone #

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| 2. Principal Place | | 3. Mailing Address | ≥~∪6 | 9 | | | | | | |
| Suite, Apt. #, | etc. | Suite, Apt. #, etc. | | | DO NOT WRITE IN THIS SPACE | | | | | |
| City & State | tz Florida | City & State | ₽L; | orid | a | 4. FEI Number 59-288 | 7868 | З | Applied For Not Applicable | |
| ^{Zip} 335 | SE LISA | ^{Zip} | Cour | itry 15 A | | 5. Certificate of Statu | us Desired | | .75 Additional Required | |
| | The second second | | | Name | 1.1 | 7. Name and Address | of Current R | egistered Ag | ent | |
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| | amed entity submits this statement for as of registered agent. | the purpose of changing its | register | ed office or | registere | ed agent, or both, in the | State of Florid | da. I am famili | ar with, and accept | |
| SIGNATURE | nature, typed or printed name of registered agent a | od tile if apolicable (NOT | E: Progistara | d Acces signatu | to tone institu | when reinstating) | | DATE | | |
| Janua | ary 1 - May 1 Fee is \$150.00 | ite in applicable. (NOT | E. Registere | o Agent signatu | re required v | | | | | |
| | ter May 1, Fee is \$550.00 Amended UBR is \$61.25 ayable to Florida Department of | State | | | | | ampaign Finar Contribution. | icing | \$5.00 May Be Added to Fees | |
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STREET ADDRESS

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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR