#### 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

# DOCUMENT # L03000008091 TAMPA REAL ESTATE HOLDINGS, LLC



**FILED** Apr 28, 2005 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

2325 ULMERTON ROAD

2325 ULMERTON ROAD

SUITE 20 CLEARWATER, FL 33762 SUITE 20 CLEARWATER, FL 33762



### DO NOT WRITE IN THIS SPACE

01282005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 02-0710923

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MORRIS, GREGORY D 2325 ULMERTON ROAD SUITE 20 CLEARWATER, FL 33762

### DO NOT WRITE IN THIS SPACE

<ol><li>The above named entity submits this statement f</li></ol>	r the purpose of changing its registered office or registered agent, or both, in the State of Florida	I am familiar with, and accept
the obligations of registered agent.		•

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2005

U00000340489 04/28/05-80120-004 50.00

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BULLARD, FRED B JR. 2325 ULMERTON ROAD, SUITE 20 CLEARWATER, FL 33762	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MRGM BULLARD, KAROL K 2325 ULMERTON ROAD, SUITE 20 CLEARWATER, FL 33762	·
TITLE NAME STRIET ADDRESS CITY-ST-ZIP	MGRM MORRIS, GREGORY D 2325 ULMERTON ROAD, SUITE 20 CLEARWATER, FL 33762	<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS		, <del>,</del> ,

## DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing 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 is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS CITY-ST-7/P

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #