2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 07, 2005
Secretary of State

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Entity Name: TAMPA HEIGHTS PROPERTIES, L.L.C.

Current Principal Place of Business:

ONE TAMPA CITY CENTER, STE 2600
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

ONE TAMPA CITY CENTER, STE 2600
TAMPA, FL 33602

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ANGELICI, LINA ESQ
WILLIAMS SCHIFINO MANGIONE & STEADY, PA
ONE TAMPA CITY CENTER, STE 2600
TAMPA, FL 33602 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

MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: ESQ. ( ) Change (X) Addition
Name: SCHIFINO, WILLIAM J MG MBR
Address: ONE TAMPA CITY CENTER, STE. 2600
City-St-Zip: TAMPA, FL 33602 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic signature shall have the same legal effect as if 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: /S/ WILLIAM J. SCHIFINO ESQ. 07/07/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date