

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000017712

FILED
Jan 12, 2007
Secretary of State

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

Current Principal Place of Business:

ONE TAMPA CITY CENTER
SUITE 2600
TAMPA, FL 33602 US

New Principal Place of Business:

ONE TAMPA CITY CENTER
SUITE 3200
TAMPA, FL 33602 US

Current Mailing Address:

ONE TAMPA CITY CENTER
SUITE 2600
TAMPA, FL 33602 US

New Mailing Address:

ONE TAMPA CITY CENTER
SUITE 3200
TAMPA, FL 33602 US

FEI Number: 20-3107528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

ANGELICI, LINA C ESQ
WILLIAMS SCHIFINO MANGIONE & STEADY, PA
ONE TAMPA CITY CENTER, STE 3200
TAMPA, FL 33602 US

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: /S/ LINA ANGELICE, ESQ.

01/12/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SCHIFINO, WILLIAM J ESQ.
Address: ONE TAMPA CITY CENTER, STE. 2600
City-St-Zip: TAMPA, FL 33602 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SCHIFINO, WILLIAM J ESQ.
Address: ONE TAMPA CITY CENTER, STE. 3200
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 Chapter 119, 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, JR.

MGR

01/12/2007

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