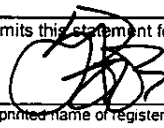
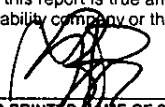


2001 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

01 JUL 12 PM 12:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L99000006476			
1. Entity Name HHP PROPERTY, L.L.C.			
Principal Place of Business 4129 Saltwater Boulevard Tampa, FL 33615		Mailing Address 4129 Saltwater Boulevard Tampa, FL 33615	
2. Principal Place of Business		3. Mailing Address 4161 E 7TH AVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State TAMPA, FL	
Zip		Zip 33605	
Country		Country USA	
4. FEI Number 59-3602820		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
Sean W. Poole 4129 Saltwater Boulevard Tampa, FL 33615		Name Street Address (P.O. Box Number is Not Acceptable) 4161 E 7TH AVE City Tampa FL Zip Code 33605	
8. 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 		DATE 7/11/01	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE	
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State		300004474989-4 -07/13/01--01072--018 *****50.00 *****50.00	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Sean W. Poole 4129 Saltwater Boulevard Tampa, FL 33615 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4161 E 7TH AVE TAMPA, FL 33605
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Raymond T. Hyer, Jr. 4129 Saltwater Boulevard Tampa, FL 33615 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4161 E 7TH AVE TAMPA, FL 33605
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Robert P. Hickey 4129 Saltwater Boulevard Tampa, FL 33615 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4161 E 7TH AVE TAMPA, FL 33605
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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: 		Sean W. Poole, MGRM	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date 7/11/01	
		Daytime Phone # 813/248-2101	

CR2E083 (11/00)