2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000005030

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FILED Sep 23, 2002 Secretary of State

Entity Name: NFL/YET CENTERS OF TAMPA BAY, INC.

Current Principal Place of Business: New Principal Place of Business: 400 NORTH TAMPA STREET SUITE 2630 TAMPA, FL 336024708 **Current Mailing Address: New Mailing Address:** 400 NORTH TAMPA STREET SUITE 2630 TAMPA, FL 336024708 FEI Number: 59-3733460 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RYDBERG, MARSHA 400 NORTH TAMPA STREET SUITE 2630 TAMPA, FL 336024708 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change (X) Addition OWENS ROYSTER, STEPHANIE Name: Name: Address: Address: 4905 34TH STREET SOUTH, STE. 220 City-St-Zip: City-St-Zip: ST. PETERSBUEG, FL 33711 US Title: Title: () Change (X) Addition () Delete Name: Name: RYDBERG, MARSHA G Address: Address: 400 N TAMPA STREET, STE. 1010 City-St-Zip: City-St-Zip: TAMPA, FL 33602 US Title: () Delete Title: **TREA** () Change (X) Addition SHIMBERG, ROBERT Name: Name: 101 E. KENNEDY BLVD., STE. 3700 Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33602 US Title: () Delete Title: SECT () Change (X) Addition Name: Name: SHIMBERG, HINKS Address: Address: 611 W. BAY STREET City-St-Zip: City-St-Zip: TAMPA, FL 33600 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 or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHANIE OWENS ROYSTER DIRE 09/23/2002