

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000001680

FILED
Feb 14, 2005
Secretary of State

Entity Name: SOUTH TAMPA TITANS, INC.

Current Principal Place of Business:

401 EAST JACKSON STREET
27TH FLOOR
TAMPA, FL 33602

New Principal Place of Business:

3675 S. WESTSHORE BLVD. #270
TAMPA, FL 33629

Current Mailing Address:

401 EAST JACKSON STREET
27TH FLOOR
TAMPA, FL 33602

New Mailing Address:

3675 S. WESTSHORE
TAMPA, FL 33629

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KLUG, CHARLES E JR.
401 EAST JACKSON STREET
27TH FLOOR
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

CHOWNING, MICHAEL S TRES
3675 S. WESTSHORE
TAMPA, FL 33629 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: MICHAEL S. CHOWNING

02/14/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KLUG, CHARLES E JR.
Address: 401 EAST JACKSON STREET, 27TH FLOOR
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: WALTRIP, RICK
Address: 4823 WEST SUNSET BLVD.
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: O'BRIEN, JAMES
Address: 4806 W. SAN MIGUEL
City-St-Zip: TAMPA, FL 33629

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DUVALL, SCOTT
Address: 3675 S. WESTSHORE
City-St-Zip: TAMPA, FL 33629

Title: V (X) Change () Addition
Name: POWELL, ROGER
Address: 3675 S. WESTSHORE
City-St-Zip: TAMPA, FL 33629

Title: S (X) Change () Addition
Name: PRESTON, JACKIE
Address: 3675 S. WESTSHORE
City-St-Zip: TAMPA, FL 33629

Title: T () Change (X) Addition
Name: CHOWNING, MICHAEL S
Address: 3675 S. WESTSHORE
City-St-Zip: TAMPA, FL 33629

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: MICHAEL S. CHOWNING

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02/14/2005

Electronic Signature of Signing Officer or Director

Date