2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000029803

Entity Name: BATH FITTER OF TAMPA INC.

FILED Apr 29, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2049 EGRET DRIVE PALM HARBOR, FL 34683 **Current Mailing Address: New Mailing Address:** 2049 EGRET DRIVE PALM HARBOR, FL 34683 FEI Number: 59-3721147 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: BRUNO, MICHAEL L CHERKOWSKI, JOHN R 600 BYPASS DRIVE 2049 EGRET DR. SUITE 115 PALM HARBOR, FL 34683 US CLEARWATER, FL 33764 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: JOHN R. CHERKOWSKI 04/29/2002 Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition CHERKOWSKI, JOHN R CHERKOWSKI, JOHN R Name: Name: 2049 EGRET DRIVE 2049 EGRET DRIVE Address: Address: City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: PALM HARBOR, FL 34683 () Delete Title: VSD () Change (X) Addition Title: Name: Name: CHERKOWSKI, PAT 2049 EGRET DR. Address: Address: PALM HARBOR, FL 34683 City-St-Zip: City-St-Zip: Title: Title: () Delete D () Change (X) Addition N/A, N/A Name: Name: N/A Address Address: City-St-Zip: City-St-Zip: N/A, NA N/A Title: () Delete Title: () Change (X) Addition N/A, N/A Name: Name: Address: Address: N/A City-St-Zip: City-St-Zip: N/A, NA N/A Title: Title: D () Delete () Change (X) Addition Name: Name: N/A, N/A Address: N/A Address: City-St-Zip: City-St-Zip: N/A, NA N/A Title: () Delete Title: D () Change (X) Addition Name: Name: N/A, N/A Address: Address: N/A City-St-Zip: City-St-Zip: N/A, NA N/A

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN R. CHERKOWSKI PTD 04/29/2002