

FILED
May 13, 2003 8:00 am
Secretary of State

05-13-2003 90049 032 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000071389					
1. Entity Name CORPORATE PROPERTIES OF TAMPA BAY, INC.					
Principal Place of Business 1712 LONG BOW LANE CLEARWATER, FL 33764			Mailing Address 1712 LONG BOW LANE CLEARWATER, FL 33764		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent					
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33146					
7. Name and Address of New Registered Agent					
Name					
Street Address (P.O. Box Number is Not Acceptable)					
City					
FL Zip Code					
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (Signature, typewritten or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when appointing)					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
PTD HOVE, STEPHEN D 1712 LONG BOW LANE CLEARWATER, FL 33764					
V THOMPSON, STEPHEN 1712 LONG BOW LANE CLEARWATER, FL 33764					
S LAWES, KEITH A 1712 LONG BOW LANE CLEARWATER, FL 33764					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ (Signature, typewritten or printed name of signing officer or director)					
5-1-03 727-515-4088					

90133567



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 010731210 ☒ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required



9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	STREET ADDRESS	TITLE	NAME	STREET ADDRESS
	PTD HOVE, STEPHEN D	1712 LONG BOW LANE		Secretary Louise Hove	1712 Long Bow Lane
CITY-ST-ZIP	CLEARWATER, FL 33764		CITY-ST-ZIP	Clearwater FL 33764	
TITLE	V THOMPSON, STEPHEN	1712 LONG BOW LANE			
CITY-ST-ZIP	CLEARWATER, FL 33764				
TITLE	S LAWES, KEITH A	1712 LONG BOW LANE			
CITY-ST-ZIP	CLEARWATER, FL 33764				
TITLE					
CITY-ST-ZIP					
TITLE					
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CITY-ST-ZIP					

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