FILED May 02, 2003 8:00 am Secretary of State

BUSINESS	

DOCUMENT # P0200098297 1. Entity Name PINELLAS PREFERRED PROPERTIES, INC.					04-17-200	3 90212	033 ***1	50.00			
Principal Place of Business Mailing Address 3000 GULF TO BAY BLVD SUITE 600 3000 GULF TO BAY BLVD CLEARWATER FL 33759 CLEARWAYER FL 33759		SUITE	SUITE 600				181 SENSE (1818)				
Principal Place of Business Address Mailing Address				1	}	F3K \$1 1 4	[8] []][] []][]	 			
Suite, Apt. #, etc. Suite, Apt. #, e		Suite, Apt. #, etc.				CHECK HERE I	F MAKING	CHANGES		_ !	
City & Sta	City & State		City & State	City & State			FEI Number 2-2378256	·	Applied For Not Applicable		<u> </u>
Zip		Country	Zìp	Cour	ntry		Certificate of Status Desired		8.75 Add	ditional ed	
	6. Name	and Address of Current F	Registered Agent			7. N	lame and Address of New Ro	gistered A	gent		╛
WILDER, MAURICE					Name						
3000 GULF TO BAY BLVD SUITE 600				Street Address (P.O. Box Number is Not Acceptable)						_	
CLEARWA	ITER FL 337	759]		<u> </u>			· · · · · · · · · · · · · · · · · · ·	
					City			FL	Zip Cod		
	named entity tions of regist		the purpose of changing its	registere	ed office or register	ed age	ent, or both, in the State of Flor	ida. I am la	miliar with,	and accept	
SIGNATURE	·						- 	<u> </u>			
		or printed name of registered agent to	nd title if applicable. (NOTE	Registere	d Agent signature required	when re:	enstating)	DATE			-
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will ba \$550.00 Make Check Payable to Florida Department of State							9. Election Campaign Fina Trust Fund Contribution			O May Be I to Fees	
10.		OFFICERS AND	DIRECTORS	11.		ADI	DITIONS/CHANGES TO OFFI	CERS AND	DIRECTORS	5 IN 11	┥ :
TITLE NAME STREET ADDRESS	3000 G	den to be sured s	☐ Delete	TITLE NAM STRE	I				Change	☐ Addition	CR2E034 (10/02)
CITY-ST-ZIP	Clean	material 3	37 <i>5</i> 7	CITY	-ST-ZIP] 22
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3000G	paesi dri F les les kens where ony other water H 3	3759		T T				☐ Change	☐ Addition	5
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	•	J				Change	Addition	**
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 hister empowered to execute his 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 unapproximation of the receiver or hister empowered.											