

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P92000010919

FILED  
Apr 02, 2003  
Secretary of State

Entity Name: TCA PROPERTIES, INC.

## Current Principal Place of Business:

14320 N. BRUCE B. DOWNS BLVD.  
TAMPA, FL 33613

## New Principal Place of Business:

## Current Mailing Address:

14320 N. BRUCE B. DOWNS BLVD.  
TAMPA, FL 33613

## New Mailing Address:

FEI Number: 59-3154002

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROCK, R. ANDREW  
401 EAST JACKSON STREET  
SUITE 2500  
TAMPA, FL 33602

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: POPE, JAMES E  
Address: 14320 N. BRUCE B. DOWNS BLVD.  
City-St-Zip: TAMPA, FL 33613

Title: DV ( ) Delete  
Name: WOODROW, THOMAS W  
Address: 14320 N. BRUCE B. DOWNS BLVD.  
City-St-Zip: TAMPA, FL 33613

Title: DS ( ) Delete  
Name: MEDINA, ROBERTO P  
Address: 14320 N BRUCE NB DOWNS BLVD  
City-St-Zip: TAMPA, FL 33613

Title: DV ( ) Delete  
Name: BERMAN, PETER  
Address: 14320 N BRUCE B DOWNS BLVD  
City-St-Zip: TAMPA, FL

Title: DT ( ) Delete  
Name: APPLEBAUM, HAL J  
Address: 14320 N BRUCE B DOWNS BLVD  
City-St-Zip: TAMPA, FL 33613

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAMES E. POPE

DP

04/02/2003

Electronic Signature of Signing Officer or Director

Date