2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 21, 2005 08:00 AM Secretary of State **DOCUMENT # P93000024537** 1. Entity Name TEMPLE TERRACE BUSINESS CENTER, INC. Mailing Address Principal Place of Business P 0 BOX 1902 P 0 BOX 1902 TAMPA, FL 33601 US TAMPA, FL 33601 04102005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3174115 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DARRYL CREIGHTON DO NOT WRITE 3000 W MARTIN LUTHER KING BLVD TAMPA, FL 33607 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) U00000320967 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 04/21/05-80055-024 150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. **PVST** TITLE NAME CREIGHTON, DARRYL BOX 1902 STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33601 TITLE NAME STREET ADDRESS CITY-ST-ZIP MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City-ST-7/P 12. I hereby certify that the information supplied with this filling 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 office the empowered.

SIGNING OFFICER OF DIRECTOR

FILED