2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 AM
Secretary of State

DOCUMENT# P93000058506

Entity Name: ECLIPSE I, INC.

Current Principal Place of Business:

1311 N. WESTSHORE BLVD.
300
TAMPA, FL 33607

New Principal Place of Business:

5050 WEST LEMON STREET
TAMPA, FL 33609

Current Mailing Address:

1311 N. WESTSHORE BLVD.
300
TAMPA, FL 33607

New Mailing Address:

5050 WEST LEMON STREET
TAMPA, FL 33609

FEI Number: 59-3200188 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STILES, MARY A
315 PLANT AVE.
TAMPA, FL 33606 US

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

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:

Title: D ( ) Delete
Name: SMITH, BARRETT B
Address: 315 PLANT AVE.
City-St-Zip: TAMPA, FL 33606

Title: PD ( ) Delete
Name: MCALLISTER III, JOHN E
Address: 913 CANDLEWOOD AVE.
City-St-Zip: TAMPA, FL 33604

Title: CD ( ) Delete
Name: STILES, MARY ANN
Address: 315 PLANT AVE.
City-St-Zip: TAMPA, FL 33606

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:

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 E MCALLISTER III D 04/30/2002

Electronic Signature of Signing Officer or Director Date