FOR PROFIT CORPORATION uniform business report (UBR)

FILED Mar 26, 2002 8:00 am Secretary of State

DOCUMENT # P94000056419 03-26-2002 90091 037 ***150.00 SP REAL ESTATE, INC. DO NOT WRITE IN THIS SPACE B005146a 3. Mailing Address DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3269230 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE City 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing After May 1, Fee is \$550.00 \$5.00 May Be Tax filing requirement and elects to do so. Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. TITLE CR2E034B (12/01) TITLE H. BOWMAN III NAME JACKSON NAME 1298 384 AVE. NE ST. PETERSBURG, FL 33704 STREET ADDRESS . STREET ADDRESS CITY - ST - Z/P CITY-ST-ZIP TITLE ROBERT K. STRICKLAND 1343 52ND AVE. NE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ETERS BURG-, FL 33703 CfTY-ST-7/P TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY - ST - ZIP TITLE TITLE IN THIS SPACE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-7/P CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 11 or on an attachment with an address, with all other like empowered.

JACKSON H. BOWMAN III SIGNATURE

894-199

Daytime Phone