

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000044972

FILED  
Aug 13, 2003  
Secretary of State

Entity Name: WEST TAMPA, INC.

## Current Principal Place of Business:

%N. AMERICAN PROPERTIES-SOUTHEAST, INC.  
12995 S CLEVELAND AVE, SUITE 214  
FT MYERS, FL 33907

## Current Mailing Address:

%N. AMERICAN PROPERTIES-SOUTHEAST, INC.  
12995 S CLEVELAND AVE, SUITE 214  
FT MYERS, FL 33907

## New Principal Place of Business:

%N. AMERICAN PROPERTIES-SOUTHEAST, INC.  
7500 COLLEGE PARKWAY  
FT MYERS, FL 33907

## New Mailing Address:

%N. AMERICAN PROPERTIES-SOUTHEAST, INC.  
7500 COLLEGE PARKWAY  
FT MYERS, FL 33907

FEI Number: 65-0679864

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAFELE, DALE G  
12995 SO. CLEVELAND AVENUE  
SUITE 214  
FT. MYERS, FL 33907 US

## Name and Address of New Registered Agent:

HAFELE, DALE G  
7500 COLLEGE PARKWAY  
FT. MYERS, FL 33907 US

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:

08/13/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WILLIAMS, WILLIAM J JR  
Address: 121 E THIRD ST, SUITE 300  
City-St-Zip: CINCINNATI, OH 45202

Title: D ( ) Delete  
Name: WILLIAMS, THOMAS L  
Address: 212 E THIRD ST STE 300  
City-St-Zip: CINCINNATI, OH 45202

Title: D ( ) Delete  
Name: GROTE, RICHARD W  
Address: 5240 LESTER ROAD, SUITE 200  
City-St-Zip: CINCINNATI, OH 452132586

Title: D ( ) Delete  
Name: GROTE, THOMAS D  
Address: 5240 LESTER ROAD, SUITE 200  
City-St-Zip: CINCINNATI, OH 452132586

Title: VSD ( ) Delete  
Name: HAFELE, DALE G  
Address: 12995 S. CLEVELAND AVE., STE. 214  
City-St-Zip: FT. MYERS, FL

Title: O ( ) Delete  
Name: SPREHN, SUSAN M  
Address: 12995 S CLEVELAND AVE STE 214  
City-St-Zip: FT MYERS, FL 33907

## 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: VSD (X) Change ( ) Addition  
Name: HAFELE, DALE G  
Address: 7500 COLLEGE PARKWAY  
City-St-Zip: FT. MYERS, FL

Title: O (X) Change ( ) Addition  
Name: SPREHN, SUSAN M  
Address: 7500 COLLEGE PARKWAY  
City-St-Zip: FT MYERS, FL 33907

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: SUSAN M. SPREHN

O

08/13/2003

Electronic Signature of Signing Officer or Director

Date