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FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT 2000

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000016534

1. Corporation Name
North Tampa Properties, Inc.

Principal Place of Business — Mailing Address
10647 U S Hwy.19
Hudson, FL 34667

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/19/1998
4. FEI Number: 59-3499594 — Applied For / Not Applicable
5. Certificate of Status Desired — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees
Personal Property Tax: [X] Yes [ ] No

2. Principal Place of Business: 3049 Drane Field Rd.
Suite, Apt #, etc.: Unit #8
City & State: Lakeland, FL
Zip: 33811 Country: USA

2a. Mailing Address — Suite, Apt. #, etc. — City & State

9. Name and Address of Current Registered Agent
Stephen M. Egan
10647 U.S. Hwy. 19
Hudson, FL 34667

10. Name and Address of New Registered Agent
Name: Stephen M. Egan
Street Address (P.O. Box Number is Not Acceptable): 1112 Vinetree Dr.
City: Brandon FL Zip Code: 33510

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] — Date: 4-27-00

12. OFFICERS AND DIRECTORS

Title	Name	Street Address	City-St-Zip	
DP	Egan, Stephen M	~~10647 U.S. Hwy 19~~	~~Hudson, FL 34667~~	[ ] DELETE
		3049 Drane Field Rd #8	Lakeland Fl 33811	[ ] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Title	Name	Street Address	City-St-Zip	
D	Stephen M. Egan	1112 Vinetree Dr.	Brandon, FL 33510	[X] Change [ ] Addition

14. 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X [signature] 4-27-00 863-644-0030