## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000091720

**FILED** Apr 28, 2006 Secretary of State

Entity Name: IH TAMPA PALMS, INC. **Current Principal Place of Business: New Principal Place of Business:** 6322 GUNN HWY TAMPA, FL 33625 **Current Mailing Address: New Mailing Address:** 6322 GUNN HWY TAMPA, FL 33625 FEI Number: 59-3542765 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CUNNINGHAM, DELTON N ROGLER, ANDREW L 6522 GUNN HIĞHWAY 6522 GUNN HIGHWAY TAMPA, FL 33625 TAMPA, FL 33625 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: ANDREW L ROGLER 04/28/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition SUAREZ, JACK D Name: Name: 6522 GUNN HWY Address: Address: City-St-Zip: TAMPA, FL 33625 City-St-Zip: DP Title: Title: () Delete () Change () Addition CLARK, JAMES R Name: Name: 6522 GUNN HWY Address: Address: TAMPA, FL 33625 City-St-Zip: City-St-Zip: Title: Title: DV () Delete () Change () Addition ELLERBEE, MARK Name: Name: 6522 GUNN HWY Address: Address: City-St-Zip: TAMPA, FL 33625 City-St-Zip: Title: ( ) Delete Title: () Change () Addition CUNNINGHAM, DELTON N Name: Name: Address: 6522 GUNN HWY Address: City-St-Zip: TAMPA, FL 33625 City-St-Zip: Title: ( ) Delete Title: () Change () Addition LYNCH, PAUL R Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: JACK D SUAREZ DC 04/28/2006

101 EAST KENNEDY BLVD, STE, 2800

TAMPA, FL 33602

Address: City-St-Zip: