

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000107328

FILED
Mar 10, 2009
Secretary of State

Entity Name: CENTER PROPERTIES OF TAMPA BAY, INC.

Current Principal Place of Business:

27001 U.S. HWY. 19 N., STE. 2095
CLEARWATER, FL 33761

New Principal Place of Business:

27001 U.S. HWY. 19 NORTH
SUITE 2095
CLEARWATER, FL 33761

Current Mailing Address:

27001 U.S. HWY. 19 N., STE. 2095
CLEARWATER, FL 33761

New Mailing Address:

27001 U.S. HWY. 19 NORTH
SUITE 2095
CLEARWATER, FL 33761

FEI Number: 59-3630653

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

POLLACK, LOREN
27001 U.S. HWY. 19 N., STE. 2095
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

POLLACK, LOREN
27001 U.S. HWY. 19 NORTH
SUITE 2095
CLEARWATER, FL 33761 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:

03/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: POLLACK, LOREN
Address: 27001 U.S. HWY. 19 N., STE. 2095
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: SCHER, DAVID
Address: 27001 U.S. HWY. 19 N., STE. 2095
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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.

SIGNATURE: LOREN M. POLLACK

D

03/10/2009

Electronic Signature of Signing Officer or Director

Date