2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State

03-06-2002 90055 032 ****61.25

DOCUMENT # 715371

1. Entity Name

TROPIC HARBOR ASSOCIATION, INC.

Principal Place of Business	Mailing Address
800 TROPIC ISLE DRIVE DELRAY BEACH FL 33483	800 TROPIC ISLE DRIVE DELRAY BEACH FL 33483

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1310055 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BECKER & POLIAKOFF, P.A. 500 AUSTRALIAN AVE SOUTH 9TH FLOOR WEST PALM BEACH FL 33401	Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD ☐ Delete		TITLE PD ☑ Change ☐ Addition	
NAME	RITAHIE, BETTY	NAME	Kennett, C H
STREET ADDRESS	3401 SPANISH TRAIL #151G	STREET ADDRESS	3401 Spanish Trail # G-152
CITY-ST-ZIP	DELRAY BEACH FL 33483	CITY-ST-ZIP	Delray Beach FL 33483
TITLE VD ☐ Delete		TITLE VD ☑ Change ☐ Addition	
NAME	CAPPELLA, JOE	NAME	Toiano, Mike
STREET ADDRESS	3301 SPANISH TRAIL #101	STREET ADDRESS	3401 Spanish Trail # A-400
CITY-ST-ZIP	DELRAY BEACH FL 33483	CITY-ST-ZIP	Delray Beach FL 33483
TITLE 2VD ☑ Delete		TITLE VD (2nd) ☑ Change ☐ Addition	
NAME	GRIMES, VANES	NAME	Talbott, Bill
STREET ADDRESS	3351 SPANISH TRAIL #111	STREET ADDRESS	3421 Spanish Trail B-326
CITY-ST-ZIP	DELRAY BEACH FL 33483	CITY-ST-ZIP	Delray Beach FL 33483
TITLE 3VD ☐ Delete		TITLE VD (3rd) ☑ Change ☐ Addition	
NAME	KENNETT, C H	NAME	Cappella, Joe
STREET ADDRESS	3401 SPANISH TRAIL #152	STREET ADDRESS	3301 Spanish Trail A-101
CITY-ST-ZIP	DELRAY BEACH FL 33483	CITY-ST-ZIP	Delray Beach FL 33483
TITLE T ☑ Delete		TITLE TD ☑ Change ☐ Addition	
NAME	LAY, BONNIE	NAME	Murphy, Curtis
STREET ADDRESS	3421 SPANISH TRAIL #825	STREET ADDRESS	3421 Spanish Trail E-333
CITY-ST-ZIP	DELRAY BEACH FL 33483	CITY-ST-ZIP	Delray Beach FL 33483
TITLE S ☑ Delete		TITLE S ☑ Change ☐ Addition	
NAME	WABLRON, PATRICIA	NAME	O'Brien, Janet
STREET ADDRESS	951 SPANISH TRAIL #440	STREET ADDRESS	951 Spanish Trail F-346
CITY-ST-ZIP	DELRAY BEACH FL 33483	CITY-ST-ZIP	Delray Beach FL 33483

CR2E037 (9/01)

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [illegible] 2/19/02 561-278-8192

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #