

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 23, 2004 8:00 am
Secretary of State

01-23-2004 90020 001 ****61.25

DOCUMENT # 715371

1. Entity Name
Tropic Harbor Association, Inc.



DO NOT WRITE IN THIS SPACE

24003899

2. Principal Place of Business

800 Tropic Isle Dr

3. Mailing Address

800 Tropic Isle Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Delray Beach FL

City & State

Delray Beach FL

4. FEI Number

59-1310055

Applied For

Not Applicable

Zip

33483

Country

USA

Zip

33483

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Becker + Blatoff, P.A.

Street Address (P.O. Box Number is Not Acceptable)
500 Australian Ave - 9th floor
c/o Peter C. Mollenharden, esq.

City
West Palm Beach FL Zip Code
33401

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME Robert F. Shell
STREET ADDRESS 3411 Spanish Trail
CITY-ST-ZIP #221
Delray Beach FL 33483

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP
NAME William T. Belcott
STREET ADDRESS 3421 Spanish Trail
CITY-ST-ZIP #326
Delray Beach FL 33483

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP
NAME John Hertvik, Jr.
STREET ADDRESS 3421 Spanish Trail
CITY-ST-ZIP #327
Delray Beach FL 33483

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP
NAME Aldo Rosito
STREET ADDRESS 3301 Spanish Trail
CITY-ST-ZIP #401
Delray Beach FL 33483

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T
NAME Bud Kennett
STREET ADDRESS 3401 Spanish Trail
CITY-ST-ZIP #152
Delray Beach FL 33483

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S
NAME Frances Farrell
STREET ADDRESS 3411 Spanish Trail
CITY-ST-ZIP #216
Delray Beach FL 33483

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

Signature and typed or printed name of signing officer or director

1/09/04 561-330-0081

CR2E037B (12/02)