

FILED
Jun 11, 2003 8:00 am
Secretary of State

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04-28-2003 91875 001 ***661.25

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N01000003115			
1. Entity Name TROPIC KEY CORP.			
Principal Place of Business 200 MACFARLANE DRIVE #405 DELRAY BEACH FL 33483		Mailing Address 200 MACFARLANE DRIVE #405 DELRAY BEACH FL 33483	
2. Principal Place of Business 118 QUEEN ELIZABETH COURT Suite, Apt. #, etc.		3. Mailing Address ← SAME Suite, Apt. #, etc.	
City & State No HUTCHINSON IS. FL		City & State ← SAME	
Zip 34949	Country ST. LUCIE	Zip ← SAME	Country ← SAME
4. FEI Number 03-0451200		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FOX, JUNE ANN DELRAY BEACH FL 33483		7. Name and Address of New Registered Agent Name JUNE-ANN FOX Street Address (P.O. Box Number is Not Acceptable) 118 QUEEN ELIZABETH COURT City No HUTCHINSON IS. FL Zip Code 34949	
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 June Ann Fox DATE 5/20/03 Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)			
4 FILE NOW: FEE IS \$61.25		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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOX, JUNE ANN 200 MACFARLANE DRIVE #405 DELRAY BEACH FL 33483 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOX, JUNE-ANN 118 QUEEN ELIZABETH COURT No. HUTCHINSON IS. FL 34949 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUDDY, GEOFFREY D 200 MACFARLANE DRIVE #405 DELRAY BEACH FL 33483 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 118 1/2 S.E. 7TH AVE DELRAY BEACH, FL 33483 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTIN, JAMES T 929 BANYAN DRIVE DELRAY BEACH FL 33483 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: SIGNATURE REQUIRED June Ann Fox SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE: 5/20/03 772-595-6069 5/20/03 Date	

CR2E037 (10/02)