

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000008644

FILED  
Feb 03, 2012  
Secretary of State

Entity Name: TROPICANA CO-OP, INC.

**Current Principal Place of Business:**

16711 MCGREGOR BLVD  
FORT MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

16711 MCGREGOR BLVD  
FORT MYERS, FL 33908

**New Mailing Address:**

FEI Number: 27-3533622

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STAACK, SIMMS & HERNANDEZ, P.A.  
900 DREW STREET  
SUITE 1  
CLEARWATER, FL 33755 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ROUND, GARRY  
Address: 11560 PALM DRIVE  
City-St-Zip: FORT MYERS, FL 33908

Title: D  
Name: HARPER, DOROTHY  
Address: 11560 PALM DRIVE  
City-St-Zip: FORT MYERS, FL 33908

Title: P  
Name: COVINGTON, RON  
Address: 16617 AVOCADO DR  
City-St-Zip: FORT MYERS, FL 33908

Title: VP  
Name: ALBERT, HAZEL  
Address: 12580 FLAMINGO DR  
City-St-Zip: FORT MYERS, FL 33908

Title: S  
Name: BAINBRIDGE, BETTY  
Address: 12566 FLAMINGO DR  
City-St-Zip: FT. MYERS, FL 33908

Title: T  
Name: BARNHART, OWEN  
Address: 11577 PALM DR  
City-St-Zip: FT. MYERS, FL 33908

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TODD N. NEWBY

COO

02/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date