

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002004

FILED  
Jan 31, 2010  
Secretary of State

**Entity Name:** TROPICAL ACRE ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

37511 OAK LAKE DRIVE  
ZEPHYRHILLS, FL 33541

**New Principal Place of Business:**

**Current Mailing Address:**

37511 OAK LAKE DRIVE  
ZEPHYRHILLS, FL 33541

**New Mailing Address:**

FEI Number: 59-2755864

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEBLANC, GEORGE  
37511 OAK LAKE DRIVE  
ZEPHYRHILLS, FL 33541 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: P  
Name: WILSON, GRANT  
Address: 37517 POMPANO COURT  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: SEC  
Name: MANCUSO, MARY  
Address: 37629 BERMUDA DRIVE  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: T  
Name: HOWARD, BILL  
Address: 332 BREEZY WAY  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: TRE  
Name: ROBRAHN, MARY  
Address: 37641 BIMINI DRIVE  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: T  
Name: LEACH, CONNIE  
Address: 37551 BIMIM DRIVE  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: VP  
Name: HILTON, GALE  
Address: 3221 BREEZY WAY  
City-St-Zip: ZEPHYRHILLS, FL 33541

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: MARY ROBRAHN

TRE

01/31/2010

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

\_\_\_\_\_  
Date