

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000032400

FILED
Apr 28, 2009
Secretary of State

Entity Name: TROPICAL ART DESIGNS, INC

Current Principal Place of Business:

11 ARTHUR COURT
SATELLITE BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

11 ARTHUR COURT
SATELLITE BEACH, FL 32937

New Mailing Address:

FEI Number: 20-8751089 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SEGUNA, JOSEPH P
459 COACH ROAD
SATELLITE BEACH, FL 32937 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOLLINGSWORTH, TAMARA M
Address: 11 ARTHUR COURT
City-St-Zip: SATELLITE BEACH, FL 32937

Title: VP () Delete
Name: HENRY, DAVID J
Address: 2118 POST ROAD
City-St-Zip: MELBOURNE, FL 32935

Title: TRES () Delete
Name: HENRY, GAIL A
Address: 304 HARWOOD AVE
City-St-Zip: SATELLITE BEACH, FL 32937

Title: SEC () Delete
Name: HENRY, MICHAEL P
Address: 11 ARTHUR COURT
City-St-Zip: SATELLITE BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TRES (X) Change () Addition
Name: HOLLINGSWORTH, TAMARA M
Address: 11 ARTHUR CT.
City-St-Zip: SATELLITE BEACH, FL 32937

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL P> HENRY

SEC

04/28/2009

Electronic Signature of Signing Officer or Director

_____ Date