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May 10, 1999 8:00 am
Secretary of State

05-10-1999 90046 009 ***150.00

PROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **217297**

1. Corporation Name
TROPICANA GARDENS, INC.

Principal Place of Business
4001 SO. OCEAN BLVD.
SO PALM BEACH FL 33480

Mailing Address
4001 SO. OCEAN BLVD.
SO PALM BEACH FL 33480

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed
11/26/1958

4. FEI Number
59-1163175
☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

GERRISH, RICHARD H
2994 JOG RD.
SUITE B
GREEN ACRES FL 33467

10. Name and Address of New Registered Agent

81 Name: Edward Dicker
82 Street Address (P.O. Box Number is Not Acceptable): 500 Australian Ave South
83 Suite 600
84 City: West Palm Beach FL
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Edw Dicker — 5/1/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PO	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BRANDT, RICHARD		1.2 NAME	
STREET ADDRESS	4001 S. OCEAN BLVD #216		1.3 STREET ADDRESS	
CITY-ST-ZIP	SPB FL		1.4 CITY-ST-ZIP	
TITLE	VD	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MILLER, DOROTHY		2.2 NAME	
STREET ADDRESS	4001 S. OCEAN BLVD, #313		2.3 STREET ADDRESS	
CITY-ST-ZIP	SPB FL		2.4 CITY-ST-ZIP	
TITLE	TD	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	BERGER, RICHARD		3.2 NAME	
STREET ADDRESS	4001 S OCEAN BLVD #314		3.3 STREET ADDRESS	
CITY-ST-ZIP	S. PALM BEACH FL 33480		3.4. CITY-ST-ZIP	
TITLE	SD	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	MCKENNA, MARIANNE		4.2 NAME	
STREET ADDRESS	4001 S. OCEAN BLVD #201		4.3 STREET ADDRESS	
CITY-ST-ZIP	S. PALM BEACH FL 33480		4.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	METHERELL, CARY		5.2 NAME	
STREET ADDRESS	4001 S OCEAN BLVD #214		5.3 STREET ADDRESS	
CITY-ST-ZIP	S. PALM BEACH FL 33480		5.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	BRADLEY, KATHLEEN		6.2 NAME	
STREET ADDRESS	4001 S. OCEAN BLVD. #205		6.3 STREET ADDRESS	
CITY-ST-ZIP	S. PALM BEACH FL 33480		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dorothy J. Malone V.P. 4/27/99 561-641-2074
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)