2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006 8:00 am
Secretary of State
03-09-2006 90156 028 ****61.25

DOCUMENT # N43008

1. Entity Name
TROPICAL ACRES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1901 NE SAVANNAH ROAD JENSEN BEACH, FL 34658 US	1901 NE SAVANNAH ROAD JENSEN BEACH, FL 34658 US

03022006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number
65-0256938
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

FORTE, LORRAINE H
1111 SE FEDERAL HWY
SUITE 100
STUART, FL 34994

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

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 LETOURNEAU, EMILE 307 TROPICALIA JENSEN BEACH, FL 34957	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD TATRO, ALBERT 608 TAHITI JENSEN BEACH, FL 34957	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLAY, LAWRENCE 301 TROPICALIA JENSEN BEACH, FL 34957	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD STANABACK, DIXIE 608 TAHITI JENSEN BEACH, FL 34957	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DAMIANO, PATRICIA 334 SOUTH SEAS JENSEN BEACH, FL 34957	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T.D. COX, BARBARA 606 TAHITI Jensen Beach, FL 34957	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD EATON, IRENE 322 SOUTH SEAS JENSEN BEACH, FL 34957	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DAYNE, WALTER 338 South Seas Jensen Beach, FL 34957	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Kathleen E Peterman 3/6/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT 40027297

D

PETERMAN, KATHLEEN #N43008 SD Change

611 SOUTH SEAS

JENSEN BEACH, FL 34957