

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 217297

FILED
Feb 28, 2012
Secretary of State

Entity Name: TROPICANA GARDENS, INC.

Current Principal Place of Business:

4001 SO. OCEAN BLVD.
SO. PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

C/O ASSOCIATED PROPERTY MGMT.
1928 LAKE WORTH RD
LAKE WORTH, FL 33461

New Mailing Address:

FEI Number: 59-1163175 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ASSOCIATED PROPERTY MGMT
1928 LAKE WORTH RD
LAKE WORTH, FL 33461 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: PT
Name: BEUTEL, PEGGY
Address: 4001 S OCEAN BLVD, SUITE #314
City-St-Zip: SO. PALM BEACH, FL 33480

Title: D
Name: TUTORA, JEAN
Address: 4001 S OCEAN BLVD, SUITE #221
City-St-Zip: SO. PALM BEACH, FL 33480

Title: S
Name: BAIN, IRENE
Address: 71 MARY ST
City-St-Zip: BARRIE, ONT., CN L4N 1T2

Title: D
Name: BEUTEL, ALBERT
Address: 4001 SO. OCEAN BLVD. #108
City-St-Zip: SO. PALM BEACH, FL 33480

Title: VP
Name: WEEDEN, THOMAS
Address: 4001 S OCEAN BLVD, SUITE #318
City-St-Zip: SO PALM BEACH, FL 33480

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

SIGNATURE: BRIAN MCENTEE

APM

02/28/2012

Electronic Signature of Signing Officer or Director

Date