2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715371

Entity Name: TROPIC HARBOR ASSOCIATION, INC.

Current Principal Place of Business:

800 TROPIC ISLE DRIVE DELRAY BEACH, FL 33483

Current Mailing Address:

800 TROPIC ISLE DRIVE DELRAY BEACH, FL 33483

FEI Number: 59-1310055 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOLLENGARDEN, PETER C. 9121 NO. MILITARY TRAIL **SUITE 2000** PALM BEACH GARDENS, FL 33410 US

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: PETER C. MOLLENGARDEN 04/17/2018

Electronic Signature of Registered Agent

Date

FILED Apr 17, 2018

Secretary of State

CC9794817891

Officer/Director Detail:

328

335

VΡ Title PΠ Title

AFFRUNTI, MARTHA Name Name DEANGELIS, GEORGE VP

Address 3421 SPANISH TRAIL Address 951 SPANISH CIRCLE 340

DELRAY BEACH FL 33483 City-State-Zip: DELRAY BEACH FL 33483 City-State-Zip:

TREASURER 2ND VP Title Title

Name KEENAN, FRANK Name MAHER, LAURIE

Address 921 SPANISH CIRCLE Address 951 SPANISH CIRCLE

DELRAY BEACH FL 33483 City-State-Zip: DELRAY BEACH FL 33483 City-State-Zip:

445

221

Title 3RD VP Title **SECRETARY**

FELDMAN, ROBERT SHELL, VALERIE Name Name

Address 3421 SPANISH TRAIL Address 3411 SPANISH TRAIL

City-State-Zip: DELRAY BEACH FL 33483 City-State-Zip: DELRAY BEACH FL 33483

Title ASST. TREASURER ZULLO, LUCILLE Name

Address 921 SPANISH CIRCLE

237

225

DELRAY BEACH FL 33483 City-State-Zip:

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.

04/17/2018 SIGNATURE: FRANK KEENAN **TREASURER**

Electronic Signature of Signing Officer/Director Detail

Date