

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 760859

**Entity Name:** TROPICAL BREEZE RESORT ASSOCIATION, INC.**Current Principal Place of Business:**17001 FRONT BEACH RD.  
PANAMA CITY BEACH, FL 32413**Current Mailing Address:**9271 S JOHN YOUNG PARKWAY  
ORLANDO, FL 32819 US**FEI Number: 59-2780752****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	VP
Name	JACKSON, JAMES
Address	17001 FRONT BEACH RD.
City-State-Zip:	PANAMA CITY BEACH FL 32413

Title	PRESIDENT.
Name	HALL, JOHN J. III
Address	17001 FRONT BEACH RD.
City-State-Zip:	PANAMA CITY BEACH FL 32413

Title	TREASURER
Name	JONE, ROY
Address	17001 FRONT BEACH RD.
City-State-Zip:	PANAMA CITY BEACH FL 32413

Title	S
Name	GOULD, DEBBIE
Address	17001 FRONT BEACH RD.
City-State-Zip:	PANAMA CITY BEACH FL 32413

Title	D
Name	LOWER, BRIAN T
Address	17001 FRONT BEACH RD.
City-State-Zip:	PANAMA CITY BEACH FL 32413

*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.*

**SIGNATURE: BRIAN T. LOWER****DIRECTOR****05/01/2023**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date