

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 768019

**Entity Name:** THE TROPICANA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

15645 COLLINS AVE.  
1ST FLOOR OFFICE  
SUNNY ISLES BEACH, FL 33160-4762

**Current Mailing Address:**

15645 COLLINS AVE.  
1ST FLOOR OFFICE  
SUNNY ISLES BEACH, FL 33160-4762 US

**FEI Number:** 59-2348203

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

EISINGER BROWN LEWIS FRANKEL & CHAIET, PA  
4000 HOLLYWOOD BLVD - SUITE 265-S  
HOLLYWOOD, FL 33021 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	PRESIDENT	Title	VP, ASST. SECRETARY
Name	BLAIR, JAMES B	Name	SAMET, DANIEL
Address	15645 COLLINS AVE. 1ST FLOOR OFFICE	Address	15645 COLLINS AVE. 1ST FLOOR OFFICE
City-State-Zip:	SUNNY ISLES BEACH FL 33160-4762	City-State-Zip:	SUNNY ISLES BEACH FL 33160-4762
Title	TREASURER, SECRETARY		
Name	GRAHAM, JAMES		
Address	15645 COLLINS AVE. 1ST FLOOR OFFICE		
City-State-Zip:	SUNNY ISLES BEACH FL 33160-4762		

*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:** DANIEL SAMET

VP

01/30/2017

Electronic Signature of Signing Officer/Director Detail

Date