

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

DOCUMENT# 768269

**Entity Name:** BRADENTON TROPICAL PALMS, INC.

**Current Principal Place of Business:**

9300 N 16TH ST  
TAMPA, FL 33612

**Current Mailing Address:**

9300 N 16H ST  
TAMPA, FL 33612 US

**FEI Number:** 59-2298601

**Certificate of Status Desired:** No

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

WINFIELD, JANET  
9300 N 16TH ST.  
TAMPA, FL 33612 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:** JANET WINFIELD

03/14/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name BURTON, JIM  
Address 9300 N. 16TH ST  
City-State-Zip: TAMPA FL 33612

Title SECRETARY  
Name FILLER, LINDA  
Address 9300 N. 16TH ST.  
City-State-Zip: TAMPA FL 33612

Title PRESIDENT  
Name LONG, GEORGE  
Address 9300 N 16H ST  
City-State-Zip: TAMPA FL 33612

Title TREASURER  
Name MACMILLAN, JANICE  
Address 9300 N 16H ST  
City-State-Zip: TAMPA FL 33612

Title DIRECTOR  
Name BOYCOTT, EDWARD  
Address 9300 N 16H ST  
City-State-Zip: TAMPA FL 33612

Title DIRECTOR  
Name SAMSON, GERRY  
Address 9300 N 16H ST  
City-State-Zip: TAMPA FL 33612

Title DIRECTOR  
Name ROMANO, JOHN  
Address 9300 N 16H ST  
City-State-Zip: TAMPA FL 33612

Title DIRECTOR  
Name DESJARDINS, ROBERT  
Address 9300 N 16H ST  
City-State-Zip: TAMPA FL 33612

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*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:** LONG, GEORGE

PRESIDENT

03/14/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            CROSS, RUTH  
Address        9300 N 16H ST  
City-State-Zip: TAMPA FL 33612