

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 10, 2019
Secretary of State
2569928167CC

Entity Name: TROPICAL ISLES UTILITIES CORPORATION

Current Principal Place of Business:

281 TROPICAL ISLES CIRCLE
FT PIERCE, FL 34982

Current Mailing Address:

281 TROPICAL ISLES CIRCLE
FT PIERCE, FL 34982

FEI Number: 65-1129116

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCDANIEL, GEORGE
281 TROPICAL ISLES CIRCLE
FORT PIERCE, FL 34982 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	PRES	Title	V-P
Name	MCDANIEL, GEORGE R	Name	SOFEN, HARVEY HARVEY SOFEN
Address	497 HEMINGWAY TERRACE	Address	528 THAMES BLUFF RIDGE
City-State-Zip:	FT PIERCE FL 34982	City-State-Zip:	FORT PIERCE FL 34982
Title	TREASURER	Title	DIRECTOR
Name	CIMINO, ANTHONY	Name	COURTMANCHE, RUSSEL
Address	232 SANDY BOTTOM PLACE	Address	337 SEAHORSE TERRACE
City-State-Zip:	FORT PIERCE FL 34982	City-State-Zip:	FORT PIERCE FL 34982
Title	SECRETARY	Title	DIRECTOR
Name	PATTISON, GEORGE	Name	PAUL, KARPOWICZ
Address	314 TROPICAL ISLES CIRCLE	Address	389 SEA HORSE TERRACE
City-State-Zip:	FORT PIERCE FL 34982	City-State-Zip:	FORT PIERCE FL 34982

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: GEORGE MC DANIEL

PRESIDENT

02/10/2019

Electronic Signature of Signing Officer/Director Detail

Date