## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004461

Entity Name: TROPICAL PARADISE HOMEOWNER'S ASSOCIATION OF

BREVARD, INC.

**FILED** Feb 04, 2013 **Secretary of State** CC8579222201

## **Current Principal Place of Business:**

142 RAINBOW ST.

MERRITT ISLAND, FL 32952

# **Current Mailing Address:**

142 RAINBOW ST.

MERRITT ISLAND, FL 32952

FEI Number: 04-3692980 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

OLIVER, SUSAN M 142 RAINBOW ST.

MERRITT ISLAND, FL 32952 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 Title Ρ

Name OLIVER, SUSAN M Name EYE, MARGARET Address 142 RAINBOW ST. Address 172 RAINBOW ST.

City-State-Zip: MERRITT ISLAND FL 32952 City-State-Zip: MERRITT ISLAND FL 32952

Title Title

KURACZ, PAUL Name LEWIS, GEORGE Name Address 123 RAINBOW ST. Address 132 RAINBOW ST

City-State-Zip: MERRITT ISLAND FL 32952 City-State-Zip: MERRITT ISLAND FL 32952

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: SUSAN M. OLIVER

Electronic Signature of Signing Officer/Director Detail

02/04/2013 **TREASURER** 

Date