## 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 217297

Entity Name: TROPICANA GARDENS, INC.

**Current Principal Place of Business:** 

TROPICANA GARDENS C/O GRS MGMT 3900 WOODLAKE BLVD SUITE 309

LAKE WORTH, FL 33463

## **Current Mailing Address:**

TROPICANA GARDENS C/O GRS MGMT 3900 WOODLAKE BLVD SUITE 309 LAKE WORTH, FL 33463 US

FEI Number: 59-1163175 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECKER AND POLIAKOFF 1 EAST BROWARD BLVD

**SUITE 1800** 

FT; LAUDERDAL, FL 33301 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: DONNA DIMAGGIO BERGER 04/04/2023

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR Title **TREASURER** 

Name BAIN, IRENE Name SCHUMACHER, JEANNE

TROPICANA GARDENS C/O GRS TROPICANA GARDENS C/O GRS Address Address

**MGMT** MGMT

3900 WOODLAKE BLVD SUITE 309 3900 WOODLAKE BLVD SUITE 309

City-State-Zip: LAKE WORTH FL 33463 City-State-Zip: LAKE WORTH FL 33463

Title **SECRETARY** Title VP

PATTERSON, ABBIE FLYNN, KAREN Name Name

Address TROPICANA GARDENS C/O GRS Address TROPICANA GARDENS C/O GRS MGMT

MGMT

3900 WOODLAKE BLVD SUITE 309 3900 WOODLAKE BLVD SUITE 309 City-State-Zip: LAKE WORTH FL 33463 City-State-Zip: LAKE WORTH FL 33463

Title **PRESIDENT** Title **DIRECTOR** Name NAPOLI, VICKI Name RICHARD, RON

TROPICANA GARDENS C/O GRS Address 3900 WOODLAKE BLVD Address

MGMT 309 3900 WOODLAKE BLVD SUITE 309

City-State-Zip: LAKE WORTH FL 33463 City-State-Zip: LAKE WORTH FL 33463

Title **DIRECTOR** 

Name PICKFORD, JOAN

3900 WOODLAKE BLVD Address City-State-Zip: LAKE WORTH FL 33463

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

04/04/2023 SIGNATURE: VICKI NAPOLI **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Apr 04, 2023

**Secretary of State** 

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