2021 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 02/20/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title SECRETARY

Name WHITE, MARY Name WATSON, LINDA

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 VP Title DIRECTOR

Name PICKFORD, JOAN Name LEROY, BILL

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 VICE PRESIDENT/TREASURER

Name ROSEN, DAVID

Address TROPICANA GARDENS C/O GRS

MGMT

3900 WOODLAKE BLVD SUITE 309

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.

SIGNATURE: MARY WHITE PRESIDENT 02/20/2021

FILED Feb 20, 2021

Secretary of State

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