

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000070611

**Entity Name:** TROPICAL LAND DESIGN, INC.

**Current Principal Place of Business:**

7965 LANTANA ROAD  
LAKE WORTH, FL 33467

**Current Mailing Address:**

P.O. BOX 541779  
LAKE WORTH, FL 33454

**FEI Number:** 20-1069161

**Certificate of Status Desired:** No

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

SCHWAB, LORI J  
7965 LANTANA ROAD  
LAKE WORTH, FL 33467 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 P  
Name MECCA, MARK L  
Address P.O. BOX 541779  
City-State-Zip: LAKE WORTH FL 33454

Title S  
Name MECCA, THOMAS J  
Address P.O. BOX 541779  
City-State-Zip: LAKE WORTH FL 33454

Title V  
Name SCHWAB, JOSEPH L  
Address P.O. BOX 541779  
City-State-Zip: LAKE WORTH FL 33454

Title T  
Name CATALANO, LOUIS  
Address P.O. BOX 541779  
City-State-Zip: LAKE WORTH FL 33454

*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:** MARK L MECCA

**PRESIDENT**

**03/04/2015**

Electronic Signature of Signing Officer/Director Detail

Date