## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000090073

Entity Name: TROPIC RIVER LLC

**Current Principal Place of Business:** 

10110 S. TROPICAL TRAIL MERRITT ISLAND. FL 32952

**Current Mailing Address:** 

10110 S. TROPICAL TRAIL MERRITT ISLAND. FL 32952 US

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AMOZIG, ALBERT 10110 S. TROPICAL TRAIL 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

**FILED** Jan 23, 2017

**Secretary of State** 

CC7624513240

Authorized Person(s) Detail:

Title MGR

Title MGR

AMOZIG, KARINE Name AMOZIG, ALBERT Name

10110 S TROPICAL TRAIL Address 10110 S TROPICAL TRAIL Address 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**MGR** 

SIGNATURE: KARINE AMOZIG

Electronic Signature of Signing Authorized Person(s) Detail

01/23/2017

Date