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.

SIGNATURE: EDWARD A. MORRIS

Electronic Signature of Signing Authorized Person(s) Detail

Electronic Signature of Registered Agent

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:

Authorized Person(s) Detail :

MGRM	Title	MGRM
BAUER, CHARLES	Name	MORRIS, EDWARD A
1723 JAMAICA DRIVE	Address	1616 ATLANTIC BLVD., UNIT # 11
KEY WEST FL 33040	City-State-Zip:	KEY WEST FL 33040
	MGRM BAUER, CHARLES 1723 JAMAICA DRIVE	MGRMTitleBAUER, CHARLESName1723 JAMAICA DRIVEAddress

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L9900000968

Entity Name: TROPICAL PROPERTIES, LLC

Current Principal Place of Business:

1616 ATLANTIC BLVD. UNIT # 11 KEY WEST, FL 33040

Current Mailing Address:

1616 ATLANTIC BLVD. UNIT # 11 KEY WEST, FL 33040

FEI Number: 65-0895555

Name and Address of Current Registered Agent:

BAUER, CHARLES 1723 JAMAICA DRIVE KEY WEST, FL 33040 US

02/14/2014

FILED Feb 14, 2014 Secretary of State CC7257409203

Date

Certificate of Status Desired: No

MGRM