

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000002788

Entity Name: TROPICART, L.L.C.

Current Principal Place of Business:

65 KING STREET
ST. AUGUSTINE, FL 32084

Current Mailing Address:

860 RED FOX TRAIL
ST. AUGUSTINE, FL 32086

FEI Number: 59-3579420

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REINSCH, MARK
2700 LAKE SHORE BLVD.
JACKSONVILLE, FL 32210 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

Authorized Person(s) Detail :

Title MGRM
Name SWEENEY, WILLIAM F
Address 63 MEADOWBROOK DRIVE
City-State-Zip: HAYESVILLE NC 28904

Title MGRM
Name SWEENEY, LINDA
Address 63 MEADOWBROOK DRIVE
City-State-Zip: HAYESVILLE NC 28904

Title MGR
Name WEEKS, WILLIAM CJR
Address 860 RED FOX TRAIL
City-State-Zip: ST. AUGUSTINE FL 32086

Title MGRM
Name A. KAREN KING-WEEKS
Address 860 RED FOX TRAIL
City-State-Zip: ST. AUGUSTINE FL 32086

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

SIGNATURE: A. KAREN KING-WEEKS

MMBR

04/12/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date