2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2003 8:00 am
Secretary of State
04-04-2003 90074 038 ***150.00

DOCUMENT # 217297

1. Entity Name
TROPICANA GARDENS, INC.

Principal Place of Business	Mailing Address
4001 SO. OCEAN BLVD. PALM BEACH FL 33480	4001 SO. OCEAN BLVD. PALM BEACH FL 33480

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1163175 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ASSOCIATED PROPERTY MANAGEMENT
400 SOUTH DIXIE HIGHWAY
SUITE #10
LAKE WORTH FL 33460

7. Name and Address of New Registered Agent

Name: ASSOCIATED PROPERTY MANAGEMENT
Street Address (P.O. Box Number is Not Acceptable): 1928 LAKE WORTH ROAD
City: LAKE WORTH FL Zip Code: 33461

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE 3/20/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GASTON, JAY 4001 SO. OCEAN BLVD. PALM BEACH FL 33480	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SOLOW, MARTHA 4001 SO. OCEAN BLVD. #201 SO. PALM BEACH, FL 33480	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MCKENNA, MARIANNE 4001 SO. OCEAN BLVD, STE 201 PALM BEACH FL 33480	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHUMACHER, JEANNE 4001 SO. OCEAN BLVD. #218 SO. PALM BEACH, FL 33480	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DESIMONE, JOE 4001 S. OCEAN BLVD #108 PALM BEACH FL 33480	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CAPT, MARIA 4001 S OCEAN BLVD #206 SO PALM BEACH FL 33480	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WEEDEN, TOM 4001 S OCEAN BLVD, STE 318 PALM BEACH FL 33480	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LUOTO, LASSE 4001 S OCEAN BLVD, STE 111 SO PALM BEACH FL 33480	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jay W. Gaston (JAY W. GASTON) President 3/17/03 561-533-7198
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #