2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 567461

Entity Name: TROPICAL INN, INC.

FILED Aug 09, 2004 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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5210 ESTERO BLVD.

FORT MYERS BEACH, FL 33931

Current Mailing Address: New Mailing Address:

5210 ESTERO BLVD.

FORT MYERS BEACH, FL 33931

FEI Number: 59-1832099 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HENDRY, HANK

2242 MAIN ST

FT MYERS, FL 33902

US

WIEBEL, HENNELLS, & CARUFE
9240 BONITA BEACH ROAD
SUITE 3305

BONITA SPRINGS, FL 34135 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: NELIDA CARUFE, CPA 08/09/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name:BOGDANSKI, PAUL,Name:DRAGO, JOSEPHAddress:1330 CLARET COURTAddress:4559 PINEHURST GREENS COURT

City-St-Zip: FT MYERS BEACH, FL 33919 City-St-Zip: ESTERO, FL 33928

Title: VPT () Delete Title: SEC (X) Change () Addition

 Name:
 BOGDANSKI, PAUL,
 Name:
 MEYERS, AMANDA

 Address:
 1330 CLARET COURT
 Address:
 12536 WATEROAK DRIVE

 City-St-Zip:
 FT MYERS BEACH, FL 33919
 City-St-Zip:
 ESTERO, FL 33928

Title: S (X) Delete Title: () Change () Addition

 Name:
 BOGDANSKI, BARBARA
 Name:

 Address:
 1330 CLARET COURT
 Address:

 City-St-Zip:
 FORT MYERS BEACH, FL 33919
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 WITTER, AMANDA
 Name:

 Address:
 8900 BRIGHTON LANE
 Address:

 City-St-Zip:
 BONITA SPRINGS, FL 34135
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JOSEPH R. DRAGO PRES 08/09/2004