

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 705313

**FILED**  
**Feb 04, 2011**  
**Secretary of State**

**Entity Name:** TROPIC ISLE CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

1730 S FEDERAL HIGHWAY  
#145  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

1730 S FEDERAL HIGHWAY  
#145  
DELRAY BEACH, FL 33483

**New Mailing Address:**

**FEI Number:** 59-2064349

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FREEMAN, KELLI A  
917 BANYAN DRIVE  
DELRAY BEACH, FL 33483 US

**Name and Address of New 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: T  
Name: FRIEDMAN, PHILIP  
Address: 960 ALLAMANDA DRIVE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: S  
Name: LEWANDOWSKI, ROBERT  
Address: 928 MCCLEARY STREET  
City-St-Zip: DELRAY BEACH, FL 33483

Title: VP  
Name: DEGNER, BARRY  
Address: 919 HYACINTH DRIVE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: D  
Name: SPAULDING, JOHN  
Address: 948 DOGWOOD DR  
City-St-Zip: DELRAY BEACH, FL 33483

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KELLI A. FREEMAN

PRES

02/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date