2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Mar 14, 2008 08:00 A Secretary of State

DOC	UM	IEN"	Γ#7	7324	154

1. Entity Name

THE TROPICAL SHORES CIVIC CLUB, INC.



Principal Place of Business

Mailing Address

1601 LIVINGSTONE ST SARASOTA, FL 34231

1601 LIVINGSTONE ST SARASOTA, FL 34231



02082008 No Chg-NP

CR2E037 (4/06)

Applied For 4, FEI Number 59-1030574 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LORENZ, JAY 1613 WHARF RD SARASOTA, FL 34231

DO NOT WRITE IN THIS SPACE

the obligations of registered agent.								
SIGNATURE Signature, typod or printed name of registered agent and hitle if applicable (NOTE Registered Agent signature required when reinstating) DATE.								
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	CTORS						
TITLE NAME STREET ADDRESS CRY-ST-ZIP	PD LORENZ, JAY 1613 WHARF RD SARASOTA, FL 34231				U00000858614 04/01/08-80053-012 61.25			
IITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GUESS, GEORGE 1615 DUNMORE WAY. SARASOTA, FL. 34231							
TITLE NAME STREET ADDRESS CITY-SI-ZIP	SD BLEACH, KIMBERLY 1715 LIVINGSTONE ST SARASOTA, FL 34231		DO NOT WRITE IN THIS SPACE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LORENZ, THERESA 1613 WHARF RD SARASOTA, FL 34231							
NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, ED 1607 LIVINGSTONE ST SARASOTA, FL 34231							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROMANCE, MARK 1627 WHARF RD SARASOTA, FL 34231							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is hugand 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 67, 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.								

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