

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734698

FILED
Jan 05, 2010
Secretary of State

Entity Name: TROPIC TERRACE CONDOMINIUM ASSOCIATION, UNIT 1500, INC.

Current Principal Place of Business:

1500 TROPIC TERR
NORTH FT. MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

1500 TROPIC TERR
NORTH FT. MYERS, FL 33903

New Mailing Address:

FEI Number: 59-1644046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOUNTAIN, ARVARD
1526 TROPIC TERRACE
NORTH FORT MYERS, FL 33903 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: VP
Name: COLE, DON
Address: 1529 TROPIC TERRACE
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: P
Name: FOUNTAIN, ARVARD
Address: 1526 TROPIC TERRACE
City-St-Zip: N FORT MYERS, FL 33903

Title: S
Name: DOMINICK, VERA
Address: 1528 TROPIC TERRACE
City-St-Zip: N FORT MYERS, FL 33903

Title: T
Name: KONLEY, JACK
Address: 1535 TROPIC TERRACE
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: VP
Name: MEIERS, WM
Address: 1531 TROPIC TERRACE
City-St-Zip: N FT MYERS, FL

Title: D
Name: LOMBARDO, PAT
Address: 1509 TROPIC TERRACE
City-St-Zip: N FORT MYERS, FL 33903

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: ARVARD FOUNTAIN

PRES

01/05/2010

Electronic Signature of Signing Officer or Director

Date