

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735288

FILED
Mar 04, 2011
Secretary of State

Entity Name: TROPIC TERRACE CONDOMINIUM ASSOCIATION, UNITS 11 & 12, INC.

Current Principal Place of Business:

14360 S TAMiami TRAIL
UNIT B
FORT MYERS, FL 33912 US

New Principal Place of Business:

Current Mailing Address:

14360 S TAMiami TRAIL
UNIT B
FORT MYERS, FL 33912 US

New Mailing Address:

FEI Number: 59-1663415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAPP, PAUL
C/O P & M PROPERTY MANAGEMENT
14360 S TAMiami TRAIL UNIT B
FORT MYERS, FL 33912 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: P
Name: BARNES, TOM
Address: 14360 S. TAMiami TRAIL UNIT B
City-St-Zip: FORT MYERS, FL 33912

Title: VP
Name: BLANCHETTE, GLORIA
Address: 14360 S. TAMiami TRAIL UNIT B
City-St-Zip: FORT MYERS, FL 33912

Title: S
Name: OLIVER, BETTY
Address: 14360 S. TAMiami TRAIL UNIT B
City-St-Zip: FORT MYERS, FL 33912

Title: T
Name: MCMANUS, BETTY
Address: 14360 TAMiami TR B
City-St-Zip: FT MYERS, FL 33912

Title: D
Name: HALL, WILLIAM
Address: 14360 TAMiami TR B
City-St-Zip: FT MYERS, FL 33912

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: TOM BARNES

PRES

03/04/2011

Electronic Signature of Signing Officer or Director

Date