2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006 8:00 am
Secretary of State
05-03-2006 90224 006 ****61.25

DOCUMENT # 748671

1. Entity Name
TROPIC VILLAS NORTH HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1170 SIXTH AVE VERO BCH, FL 32960	1170 SIXTH AVE VERO BCH, FL 32960

02272006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1971217 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BECKER & POLIAKOFF, P.A.
2500 MAITLAND CENTER PKWY
SUITE 209
MAITLAND, FL 32751

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☒ Addition
TITLE S NAME STREET ADDRESS CITY-ST-ZIP	NOLTE, BARBARA 1170 6TH AVE #28 A VERO BEACH, FL 32960	☐ Delete	TITLE P NAME STREET ADDRESS CITY-ST-ZIP	CAROLYN MERGENS 1170 6TH AVE 5D VERO BEACH, FL 32960	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TROST, MICHELLE 1170 6TH AVE.#4B VERO BEACH, FL 32960	☒ Delete	TITLE VP NAME STREET ADDRESS CITY-ST-ZIP	GEORGE HORAN 12A 1170 6TH AVE VERO BEACH, FL 32960	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SOLOMON, ISABELLA 1170 6TH AVE. #28D VERO BEACH, FL 32960	☒ Delete	TITLE T NAME STREET ADDRESS CITY-ST-ZIP	GEORGE GRUNDEY 1170 6TH AVE 15D VERO BEACH, FL 32960	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FREUND, BARBARA 1170 6TH AVE 24 A VERO BEACH, FL 32960	☒ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	MICHAEL CARROLL 1170 6TH AVE 10A VERO BEACH, FL 32960	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOSES, JON 1170 6TH AVE 24 C VERO BCH., FL 32960	☒ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	RICHARD CHABORA 1170 6TH AVE 10C VERO BEACH, FL 32960	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COMMERFORD, MARY LOU 1170 6TH AVE.#20B VERO BEACH, FL 32960	☒ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	MICHAEL NISBETT 1170 6TH AVE 12B VERO BEACH, FL 32960	☐ Change ☒ Addition

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 true and 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 617, 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.

SIGNATURE: G. Grundey 4/29/06 772-978-7000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #