## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Bandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

748896

(8)

TROPIC	SHORES CONDOMINIU	IM ASSOCIATION, INC.						
Principal Place	e of Business	Mailing Address				Bir bibat ibiri ibisə ibiid b	484 <b>848</b> 14 <b>818</b> 44 <b>818</b> 14 <b>6</b> 1814 1	81811 \$1811 ISBN
14251 GULF BLVD. 14251 GULF BLVD. MADEIRA BCH. FL 33708 MADEIRA BCH. FL 33708-2230								
					3. Date Incomp 09/13	orated or Qualified /1979	3a. Date of Last 05/01/19	
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Numbe			Applied For
21		26	<u> </u>		59-20	63803		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	h		5. Certificate of	of Status Desired		Additional Required
22 City & State	9	City & State		# Etastica Co	marian financias			
23		28			mpaign Financing  Contribution		O May Be d to Fees	
Zip	Country	Zip	Country		<del></del>	ation has liability for it		
24	25	29 3	10		Florida Stat		Yes No	0. 155.002,
	9. Name and Address of Cui	rent Registered Agent			10. Name and	Address of New Res	gistered Agent	
			81	Name				
VIRTUOSO, SUSAN				Street A	Address (P.O. Box Number is Not Acceptable)			<del></del>
	ULF BLVD							
MADEIRA	A BEACH FL 33708		83					İ
			84	City			FL 85 Zir	p Code
11. Pursuant	to the provisions of Sections 617.	0502 and 617.1508, Florida Statutes	s, the above	-named	corporation submits th	is statement for the p		its registered
office or n	egistered agent, or both, in the Si m familiar with, and accept the ob	0502 and 617.1508, Florida Statutes tale of Florida. Such change was au bligations of, Section 617.0503, Flori	ithorized by da Statutes	r the corp	oration's board of dire	ctors. I hereby accep	it the appointment a	is registered -
SIGNATURE								j
SIGNATORE	Signature, typed or printed name of registered		Registered Age	ni signature	equired when reinstating)		DAYE	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/	CHANGES TO OFFIC		
TITLE	•		1.1 TITLE	- 1			Change	Addition
NAME	FURMAN, RICHARD		1.2 NAME		14000 0	16 513	4100	
STREET ADDRESS	-0512-BAYTREE COURT					lf Blvd.,		
CiTY-ST-ZIP	TAMPA-FL	DELETE	1.4 CITY-S	T-ZIP	Madelra	Beach, Fl	33708 Change	e Addition
TITLE	STD	C Deceie	2.1 TITLE 2.2 NAME				Cuante	Z Audillosi "
NAME OVER ADDRESS	LOVICO, MARIO 164-06-95 ST.							}
STREET ADDRESS	HOWARD BEACH NY		2.3 STREET ADDRESS 2.4 City-SI-ZiP					
CITY-ST-ZIP TITLE	VPD DELETE		2.4 CHY-1	51-ZH		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME	11 D		3.2 NAME	1				, , , , , , , , , , , , , , , , , , , ,
STREET ADDRESS	1 <del>23 W ROBERTSON S</del> T		3.3 STREET	ADDRESS	8 Huntin	gton Circi	le. #1	
CITY - ST - ZIP	PALATINE IL 00007		3.4. CiTY-5		Napervil	gton Circ: le, Il 609	540	
TITLE		DELETE	4.1 TITLE	· · · · · · · · · · · · · · · · · · ·		=-4 ==	Change	Addition
NAME			4. 2 NAME	}				'
STREET ADDRESS			4.3 STREET	ADDRESS	•			
CITY-S1-ZIP			4.4 CITY-S	T-ZIP				
TITLE		DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAME	ļ				į
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-S	T-ZIP				
TIFLE		☐ DELETE	6.1 TITLE	· T			Change	Applition
NAME			6.2 NAME	- 1				
STREET ADDRESS			6.3 STREET	i	*			
CITY-ST-ZIP	<u> </u>		6.4 CITY - S	T-ZIP				1

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Bloc

SIGNATURE:

SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER PA DIRECTOR

April 22, 1997

Daytime Phone # 0050578

**FILED** 

Apr 30 1997 8:00am

Secretary of State