2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#748896

FILED Apr 21, 2007 Secretary of State

Entity Name: TROPIC SHORES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

14251 GULF BLVD. MADEIRA BCH., FL 33708

Current Mailing Address: New Mailing Address:

14251 GULF BLVD. MADEIRA BEACH, FL 33708

FEI Number: 59-2063803 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WILLIAM, KEENE ESQ 601 93RD AVE N

ST. PETERSBURG, FL 33702 US

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:

The America Circumstance of Designature of America

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

 Name:
 WAGNER, LANA
 Name:

 Address:
 601 93RD AVE N
 Address:

 City-St-Zip:
 ST. PETERSBURG, FL 33702
 City-St-Zip:

Title: SEC () Delete Title: SEC (X) Change () Addition

 Name:
 PAPPAS, JIM
 Name:
 MLINARIC, FRANK

 Address:
 3704 GINGER CREEK DR
 Address:
 14251 GULF BLVD

 City-St-Zip:
 SPRINGFLEID, IL 62707
 City-St-Zip:
 MADEIRA BEACH, FL 33708

Title: TREA () Delete Title: TREA (X) Change () Addition
Name: FEILEN, DAVID Name: COYLE, RITA

Address: 10615 CARROLLWOOD DR. Address: 14251 GULF BLVD

City-St-Zip: TAMPA, FL 33618 City-St-Zip: MADEIRA BEACH, FL 33708

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LANA WAGNER PD 04/21/2007