

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F93000003052

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Entity Name:** TROPICAL CONSTRUCTION SUPPLY OF NAPLES, INC.

**Current Principal Place of Business:**

14848 OLD US 41  
NAPLES, FL 34110 US

**New Principal Place of Business:**

**Current Mailing Address:**

18412 PAULSON DR  
PORT CHARLOTTE, FL 33954 US

**New Mailing Address:**

**FEI Number:** 84-1232508

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KEITH, GARY D  
18412 PAULSON DRIVE  
PORT CHARLOTTE, FL 33954 US

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

KEITH, GARY D  
3628 GIBLIN DRIVE  
NORTH PORT, FL 34286 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:

04/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DCP  
Name: KEITH, GARY D  
Address: 3628 GIBLIN DRIVE  
City-St-Zip: NORTH PORT, FL 34286 US

Title: DVP  
Name: SAUER, GREGORY  
Address: 16900 USEPPA OAK'S LANE  
City-St-Zip: N. FT MYERS, FL 33917

Title: ST  
Name: LASPROGATO, JOAN T  
Address: 4982 LAUREL HILL DR  
City-St-Zip: VENICE, FL 34293

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOAN LASPROGATO

ST

04/09/2012

Electronic Signature of Signing Officer or Director

Date