

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94838

FILED  
Mar 02, 2010  
Secretary of State

Entity Name: EAST GLADE TROPICALS, INC.

**Current Principal Place of Business:**

18455 SW 264 STREET  
HOMESTEAD, FL 33031

**New Principal Place of Business:**

**Current Mailing Address:**

18455 SW 264 STREET  
HOMESTEAD, FL 33031

**New Mailing Address:**

FEI Number: 59-2251365

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DE MOTT, JOHN C  
18455 SW 264 ST  
HOMESTEAD, FL  
HOMESTEAD, FL 33031 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ARNOLD, RICHARD S  
Address: 865 DONALD ROSS ROAD  
City-St-Zip: JUNO BEACH, FL 33408

Title: PD  
Name: DEMOTT, JOHN C  
Address: 18455 SW 264 STREET  
City-St-Zip: HOMESTEAD, FL 33031

Title: D  
Name: DEMOTT, . RAYMOND C  
Address: 15200 S.W. 264 STREET  
City-St-Zip: PRINCETON, FL 33032

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: JOHN C DEMOTT

PRES

03/02/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date