

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H57078

FILED
Feb 13, 2009
Secretary of State

Entity Name: TROPICANA HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

16617 LANTA DR.
FORT MYERS, FL 33908 US

New Principal Place of Business:

16617 LANTANA DR.
FORT MYERS, FL 33908 US

Current Mailing Address:

16617 LANTA DR.
FORT MYERS, FL 33908 US

New Mailing Address:

16617 LANTANA DR.
FORT MYERS, FL 33908 US

FEI Number: 59-2544416

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALBERT, MARTHA
16617 LANTANA DR.
FORT MYERS, FL 33908 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: DP () Delete
Name: COVINGTON, RON
Address: 16617 AVACODO DR.
City-St-Zip: FORT MYERS, FL 33908

Title: DVP () Delete
Name: JOSEPH, AL
Address: 12526 BANYAN
City-St-Zip: FORT MYERS, FL 33908

Title: DVT () Delete
Name: STROUD, GARRY
Address: 12575 PALMETTO DR.
City-St-Zip: FORT MYERS, FL 33908

Title: DT () Delete
Name: BAINBRIDGE, JOHN
Address: 12566 FLAMINGO DR.
City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete
Name: COMO, PAT
Address: 12532 POINCIANNA DR.
City-St-Zip: FORT MYERS, FL 33908

Title: DS () Delete
Name: ALBERT, MARTHA
Address: 16617 LANTANA DR.
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change () Addition
Name: STROUD, GARRY
Address: 12575 PALMETTO DR.
City-St-Zip: FORT MYERS, FL 33908

Title: DVT (X) Change () Addition
Name: BAINBRIDGE, BETTY
Address: 12566 FLAMINGO DR.
City-St-Zip: FORT MYERS, FL 33908

Title: D (X) Change () Addition
Name: COMBS, PAT
Address: 12532 POINCIANNA DR.
City-St-Zip: FORT MYERS, FL 33908

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTHA ALBERT

DS

02/13/2009

Electronic Signature of Signing Officer or Director

Date