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FILED  
May 14 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # H92310

(2)

1. Corporation Name

TROPICANA VILLAGE, INC.

Principal Place of Business

4744 SE 132ND PLACE  
44 S.E. FIRST AVENUE  
BELLEVUE FL 32620

Mailing Address

4744 SE 132ND PLACE  
44 S.E. FIRST AVENUE  
BELLEVUE FL 34420-5052



3. Date Incorporated or Qualified  
12/31/1985

3a. Date of Last Report  
06/19/1996

4. FEI Number  
59-2626511

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLANCHARD, CUSTURERI, MERRIAN & ADEL PA  
44 S.E. FIRST AVENUE  
OCALA FL 32671

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Blanchard, Custureri, Merriam & Adel

5-5-97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE  
NAME DICANDIA, LUCY J.  
STREET ADDRESS 4775 SOUTHEAST 130TH PLACE  
CITY-ST-ZIP BELLEVUE FL

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE VD ☒ DELETE  
NAME LEVESQUE, LISA  
STREET ADDRESS 4744 SE 132ND PLACE  
CITY-ST-ZIP BELLEVUE FL

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME VD  
2.3 STREET ADDRESS DICANDIA, PAUL II  
2.4 CITY-ST-ZIP 4840 S.E. 132nd. Pl.  
BELLEVUE, FL. 34420

TITLE ST ☒ DELETE  
NAME DICANDIA, CONSTANCE  
STREET ADDRESS 4774 SOUTHEAST 132ND PLACE  
CITY-ST-ZIP BELLEVUE FL

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME ST  
3.3 STREET ADDRESS LISA LEVESQUE  
3.4 CITY-ST-ZIP 4840 S.E. 132nd. Pl.  
Bellevue FL. 34420

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (9/96)