2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000041706

Entity Name: TROPICAL INVESTMENT PROPERTIES, LLC

FILED Feb 05, 2007 Secretary of State

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

756 SEVEN GABLES CIRCLE SE 896 TAVERNIER CIRCLE NE

PALM BAY, FL 32909 PALM BAY, FL 32909

Current Mailing Address: New Mailing Address:

756 SEVEN GABLES CIRCLE SE 896 TAVERNIER CIRCLE NE PALM BAY, FL 32909 PALM BAY, FL 32905

FEI Number: 20-0746182 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:

DIXON, SCOTT C P. A. 2202 SOUTH BABCOCK STREET SUITE 200 MELBOURNE, FL 32901 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete Name: JOHNSON, STEVEN R

Address: 756 SEVEN GABLES CIRCLE SE

City-St-Zip: PALM BAY, FL 32909

Title: () Delete

Name: Address: City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition

Name: JOHNSON, STEVEN R Address: 896 TAVERNIER CIRCLE NE City-St-Zip: PALM BAY, FL 32905

Title: MGRM () Change (X) Addition

Name: JOHNSON, ELLEN P Address: 896 TAVERNIER CIRCLE NE City-St-Zip: PALM BAY, FL 32905

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: STEVE JOHNSON MGRM 02/05/2007