

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000019482

FILED
Apr 27, 2009
Secretary of State

Entity Name: TROPICAL DEVELOPMENT, L.L.C.

Current Principal Place of Business:

2805 S. HORSESHOE DR.
UNIT # 1
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

2805 S. HORSESHOE DR.
UNIT # 1
NAPLES, FL 34104

New Mailing Address:

P.O. BOX 12183
NAPLES, FL 34101

FEI Number: 20-0857770

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TARVIN, MICHAEL
2805 S. HORSESHOE DR
UNIT # 1
NAPLES, FL 34104 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SORBARA, GEORGE
Address: 2805 S. HORSESHOE DR. - UNIT # 1
City-St-Zip: NAPLES, FL 34104

Title: MGRM () Delete
Name: TARVIN, MICHAEL
Address: 2805 S. HORSESHOE DR. - UNIT # 1
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES:

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

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 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: MICHAEL TARVIN

MGRM

04/27/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date