

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000061126

Entity Name: TROPIC HOMES LLC

FILED
Sep 05, 2007
Secretary of State

Current Principal Place of Business:

374 APACHE LANE
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

374 APACHE LANE
BOCA RATON, FL 33487

New Mailing Address:

P.O. BOX 6486
DELRAY BEACH, FL 33482

FEI Number: 74-3148279 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DEROGATIS, DANIEL
4282 NORTH MAGNOLIA CIRCLE
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

DEROGATIS, DANIEL
1310 W MAGNOLIA CIR
DELRAY BEACH, FL 33445 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: _____

09/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DEROGATIS, DANIEL
Address: 4282 NORTH MAGNOLIA CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445

Title: MGR () Delete
Name: ZELLS, JOHN
Address: 374 APACHE LANE
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DEROGATIS, DANIEL
Address: 1310 W MAGNOLIA CIR
City-St-Zip: DELRAY BEACH, FL 33445

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: JOHN ZELLS

MGR

09/05/2007

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