2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 09, 2008 8:00 am
Secretary of State
04-10-2008 90129 049 ***138.75

DOCUMENT # L05000121251

1. Entity Name
TROPICAL HOLDINGS & INVESTMENTS LLC

Principal Place of Business	Mailing Address
5035 AVON ST. LAKE WALES, FL 33859	5035 AVON ST. LAKE WALES, FL 33859

300090U9

03252008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3836971
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

[redacted] Rachele Burgess
5035 AVON ST.
LAKE WALES, FL 33859

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Rachele L. Burgess 6/4/08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	[redacted] Burgess, Rachele
STREET ADDRESS	23781 US HWY 27 #300
CITY-ST-ZIP	LAKE WALES, FL 33859
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Rachele L. Burgess 6/4/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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Document Number	L05000121251
Business Entity Name	TROPICAL HOLDINGS & INVESTMENTS LLC
Prior notice was	Received
FEI Number	043836971
FEI Number Status	
Certificate of Status Desired	No

Principal Place of Business

Address	5035 AVON ST.
City, State	LAKE WALES, FL
Zip Code & Country	33859

Mailing Address

Address	5035 AVON ST.
City, State	LAKE WALES, FL
Zip Code & Country	33859

Name And Address of Registered Agent

Name (Last, First, Middle, Title)	BURGESS, RACHELE , L
Address	5035 AVON ST.
City, State	LAKE WALES, FL
Zip Code & Country	33859 US
Registered Agent Signature	RACHELE BURGESS

Managing Member/Manager Name And Address

Name And Address #1

Title	MGR

ATTACHMENT

20009094

#L05000121251

Name (Last, First, Middle, Title) BURGESS, RACHELE , L
Street Address 23781 US HWY 27 #300
City, State LAKE WALES, FL
Zip Code & Country 33859

Title MGR
Managing Member/Manager Signature RACHELE BURGESS

Continue