

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016528

Entity Name: TROPIC REALTY, LLC

FILED  
Jan 19, 2009  
Secretary of State

**Current Principal Place of Business:**

6606 GRANDE ORCHID WAY  
DELRAY BEACH, FL 33446

**New Principal Place of Business:**

3907 S OCEAN BLVD  
HIGHLAND BEACH, FL 33487

**Current Mailing Address:**

6606 GRANDE ORCHID WAY  
DELRAY BEACH, FL 33446

**New Mailing Address:**

3907 S OCEAN BLVD  
HIGHLAND BEACH, FL 33487

FEI Number: 20-4454720

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WEISMAN, DAVID ESQ  
GREENSPOON MARDER, P.A.  
100 WEST CYPRESS CREEK ROAD, #700  
FT. LAUDERDALE, FL 33309 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: KLEIMAN, JEFFREY  
Address: 6606 GRANDE ORCHID WAY  
City-St-Zip: DELRAY BEACH, FL 33446

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: KLEIMAN, JEFFREY  
Address: 3907 S OCEAN BLVD  
City-St-Zip: HIGHLAND BEACH, FL 33487

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: JEFFREY KLEIMAN

MR.

01/19/2009

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