

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000010830

**FILED**  
**Feb 07, 2011**  
**Secretary of State**

**Entity Name:** TROPIC SCAPES SERVICES LLC

**Current Principal Place of Business:**

3640 DIXIE HWY NE  
PALM BAY, FL 32905

**New Principal Place of Business:**

**Current Mailing Address:**

1807 NEPTUNE DRIVE  
MELBOURNE BEACH, FL 32951

**New Mailing Address:**

**FEI Number:** 59-2532406

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YOTTI, LINDY S  
1807 NEPTUNE DRIVE  
MELBOURNE BEACH, FL 32951 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:** MGR  
**Name:** YOTTI, LINDY S  
**Address:** 1807 NEPTUNE DRIVE  
**City-St-Zip:** MELBOURNE BEACH, FL 32951

**Title:** MGRM  
**Name:** YOTTI LYNCH, PEGGI  
**Address:** 2020 TWO TREE LANE  
**City-St-Zip:** WAUWATOSA, WI 53213

I hereby 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:** LINDY S. YOTTI

MGR

02/07/2011

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