

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000136980

FILED  
Apr 29, 2012  
Secretary of State

**Entity Name:** TROPICAL BREEZE RENTALS, LLC

**Current Principal Place of Business:**

6194-C PRINCIPIA DRIVE  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

6194-C PRINCIPIA DRIVE  
FORT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 45-4098449

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WALINSKI, BARRY E  
6194-C PRINCIPIA DRIVE  
FORT MYERS, FL 33919 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  
Name: WALINSKI, BARRY E  
Address: 6194-C PRINCIPIA DRIVE  
City-St-Zip: FORT MYERS, FL 33919 US

Title: MGR  
Name: WALINSKI, CARMEN N  
Address: 6194-C PRINCIPIA DRIVE  
City-St-Zip: FORT MYERS, FL 33919 US

Title: MGR  
Name: MARQUIS, DENNIS  
Address: 123 SW 19TH LANE  
City-St-Zip: CAPE CORAL, FL 33991 US

Title: MGR  
Name: WONGWAI, JIRAPORN  
Address: 123 SW 19TH LANE  
City-St-Zip: CAPE CORAL, FL 33991 US

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: BARRY WALINSKI

MGRM

04/29/2012

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