2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004497

FILED Feb 12, 2011 Secretary of State

Entity Name: TROPICAL ISLES UTILITIES CORPORATION

Current Principal Place of Business: New Principal Place of Business:

281 TROPICAL ISLES CIRCLE FT PIERCE, FL 34982

Current Mailing Address: New Mailing Address:

281 TROPICAL ISLES CIRCLE FT PIERCE, FL 34982

FEI Number: 65-1129116 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ELMORE, BETTY S

281 TROPICAL ISLES CIRCLE
FORT PIERCE, FL 34982 US

YOUNG, VIRGINIA
281 TROPICAL ISLES CIRCLE
FORT PIERCE, FL 34982 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: VIRGINIA YOUNG 02/12/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: S/TR

Name: HEBERT, DONALD A
Address: 232 SEA CONCH PLACE
City-St-Zip: FT PIERCE, FL 34982

Title: P

Name: BAIA, VINCENT
Address: 205 TRAVIS CAY PLACE

City-St-Zip: FORT PIERCE, FL 34982

Title: V-P

 Name:
 BROPHY, THOMAS

 Address:
 5684 HEMINGWAY COURT

 City-St-Zip:
 FORT PIERCE, FL 34982

Title:

Name: BEAULIEU, ROGER

Address: 525 HEMINGWAY TERRACE City-St-Zip: FORT PIERCE, FL 34982

Title:

Name: SABIA, HAROLD

Address: 243 OLD KEY WEST PLACE City-St-Zip: FORT PIERCE, FL 34982

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DONALD HEBERT S/T 02/12/2011