## 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N00000004497

FILED Nov 03, 2014 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:

EDWARDS, LETICIA

281 TROPICAL ISLES CIRCLE
FORT PIERCE, FL 34982 US

MCDANIEL, GEORGE
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: GEORGE MCDANIEL 11/03/2014

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PRES

Name: MCDANIEL, GEORGE R Address: 497 HEMINGWAY TERRACE City-St-Zip: FT PIERCE, FL 34982

Title: V-P

Name: BENZ, DONALD

Address: 368 TROPICAL ISLES CIRCLE City-St-Zip: FORT PIERCE, FL 34982

Title:

Name: CIMINO, ANTHONY
Address: 232 SANDY BOTTOM PLACE
City-St-Zip: FORT PIERCE, FL 34982

Title: 5

Name: BROOKS, JOHN

Address: 364 TROPICAL ISLES CIRCLE City-St-Zip: FORT PIERCE, FL 34982

Title:

Name: KARPOWICZ, PAUL
Address: 399 SEAHORSE TERRACE
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: GEORGE MCDANIEL PRES 11/03/2014