## 2002 UNIFORM BUSINESS REPORT (UBR)

2002 UNIFORM BUS	SINESS REPO	; RT (UBI	3 A <sub>1</sub>	FILE or 09, 2002		
DOCUMENT # NO1000	S	Apr 09, 2002 8:00 am Secretary of State				
TROPIC EAST CONDOMINIUM ASS	OCIATION INCORPOR	ATED				
Principal Place of Business	Mailing Address					
2410 N. LAKESIDE DRIVE LAKE WORTH FL 33460	2410 N. LAKESIDE DRIVE LAKE WORTH FL 33460			21625		
2. Principal Place of Business 1515 N. Federal Hu	3. Mailing Address					
Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
LAKe Worth FL.	City & State	<u> </u>		556270	Applied For Not Applicable	
33460 Country USA	Zip	Country	5. Certificate of St		3.75 Additional e Required	
6. Name and Address of Current	t Registered Agent	Name	7. Name and Add	Iress of New Registered Age	ent	
			JOAN ZeITLIN			
LAMBERT, DANNY 2511 PARK STREET LAKE WORTH FL 33460		Street A	dress (P.O. Box Number is i	(P.O. Box Number is Not Acceptable)		
		2º	410 N. Lake	N. Lakesile DR.		
		City	City LAKE WORTH FL ZIP 233 46		Zip Code 460	
8. The above named entity submits this statement to SIGNATURE GOAL Zettler	Secty. TX	easur eitlin	e e	the state of Florida.	102	
Signature, typed or going name of registered agen	t and title if applicable. (NOTE	: Registered Agent eighetu	re required when reinstating)	DÁTE A		
FILE NOW: FEE IS \$61.25	9. Election Cam Trust Fund C	npaign Financing contribution.	\$5.00 May Be Added to Fees	Make Check P Department		
10. OFFICERS AND DI	RECTORS	11.	ADDITIONS/CHANG	ES TO OFFICERS AND DIREC	TORS IN 10	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	PAES. DANNY LAMB "2511 PARK S	beat "D" [ T. Lakeworth	Change (Addition 50) FL 33460 ES	
TITLE	☐ Delete	TITLE NAME	Vice PRES.		Change 🔀 Addition 🖔	
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	Phillip DRAUGH	LHWITTS LAK	E Woeth L 33460	
TITLE NAME	☐ Delete	TITLE D	JOHN ZEIT			
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	LAKE WORTH	1 33460		
TITLE	☐ Delete	TITLE			Change	
NAME STREET ADDRESS CITY-ST-ZIP		NAME STREET ADDRESS CITY-ST-ZIP				
TITLE .	☐ Delete	TITLE			Change	
NAME		NAME			<b>\</b>	
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS City-St-Zip				
TITLE	☐ Delete	TITLE			Change Addition	
NAME STREET ADDRESS		NAME Street Address				
CITY-ST-ZIP		CITY-ST-ZIP				
<ol> <li>I hereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver or trustee emperature.</li> </ol>	s true and accurate and that m	v sionature shall ha	ve the same legal effect as if	i made under oath: that I am a	n officer or director 1	