

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 24, 2006 08:00 AM
Secretary of State

DOCUMENT # N01000008425

1. Entity Name

**TROPIC EAST CONDOMINIUM ASSOCIATION
INCORPORATED**



Principal Place of Business

**1515 N. FEDERAL HWY
LAKE WORTH FL 33460**

Mailing Address

**2410 N. LAKESIDE DRIVE
LAKE WORTH FL 33460**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc

Suite, Apt. #, etc

City & State

City & State

1st MOORE

CR2E037 (10/05)

Zip

Country

Zip

Country

4. FEI Number

01-0556270

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ZEITLIN, JOAN
2410 N. LAKESIDE DRIVE
LAKE WORTH FL 33460**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
ZEITLIN, JOAN
2410 N. LAKESIDE DR.
LAKE WORTH FL 33460**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
DRAUGH, PHILLIP
1515 N. FEDERAL HWY, #5
LAKE WORTH FL 33460**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
ZEITLIN, JOAN
2410 N. LAKESIDE DRIVE
LAKE WORTH FL 33460**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
**U00000445060
03/07/06-BU029-001 61.25**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 (if changed, or on an attachment) with an address, with all other like empowered.

SIGNATURE: *Joan Zeitlin* **Joan Zeitlin 2/20/06 561-582-60**