

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000010347

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** TROPICAL ISLE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6450 TROPICAL WAY  
VERO BEACH, FL 32967

**New Principal Place of Business:**

**Current Mailing Address:**

6450 TROPICAL WAY  
VERO BEACH, FL 32967

**New Mailing Address:**

**FEI Number:** 20-1834003

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PALADIN, MICHELE  
6450 TROPICAL WAY  
VERO BEACH, FL 32967 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

**OFFICERS AND DIRECTORS:**

**Title:** PSTD  
**Name:** PALADIN, MICHELE  
**Address:** 6450 TROPICAL WAY  
**City-St-Zip:** VERO BEACH, FL 32967

**Title:** D  
**Name:** PALADIN, JOSEPH  
**Address:** 6450 TROPICAL WAY  
**City-St-Zip:** VERO BEACH, FL 32967

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:** MICHELE PALADIN

PSTD

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date