

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 05, 2007
Secretary of State**

DOCUMENT# N04000010915

Entity Name: TROPICAL PARK PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

15355 TAKE OFF PLACE
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

15355 TAKE OFF PLACE
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BEAUVENTURE CORP., INC.
15355 TAKE OFF PL
WELLINGTON, FL 33414 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: PD () Delete
Name: BONSAINT, SERGE
Address: 15355 TAKE OFF PLACE
City-St-Zip: WELLINGTON, FL 33414

Title: STD () Delete
Name: VAILLANCOURT, DANIELLE
Address: 15355 TAKE OFF PLACE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SERGE BONSAINT

PD

01/05/2007

Electronic Signature of Signing Officer or Director

_____ Date