2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2007 8:00 am
Secretary of State
02-22-2007 90010 020 ****61.25

DOCUMENT # N05000006763

1. Entity Name
TROPICAL SHORES NEIGHBORHOOD ASSOCIATION, INC.

40022707

Principal Place of Business	Mailing Address
2326 TROPICAL SHORES DR. S.E. ST. PETERSBURG, FL 33705	2326 TROPICAL SHORES DR. S.E. ST. PETERSBURG, FL 33705

02192007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business – No P.O. Box #	3. Mailing Address
2250 W Bay Isle Dr SE Suite, Apt. #, etc.	2250 W Bay Isle Dr SE Suite, Apt. #, etc.
City & State: St Petersburg FL	City & State: St Petersburg FL
Zip: 33705 Country: Pinellas/USA	Zip: 33705 Country: Pinellas/USA

4. FEI Number APPLIED FOR 20-3126014 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KNOWLTON, DAVID 2253 W. BAY ISLE DR. ST. PETERSBURG, FL 33705	Name: LAURA J. SCHAUS Street Address (P.O. Box Number is Not Acceptable): 2250 W Bay Isle Dr SE City: St Petersburg FL Zip Code: 33705

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: Laura Schaus 2-19-07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP CARLO, LINDA 2326 TROPICAL SHORES DR. S.E. ST. PETERSBURG, FL 33705	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	DP Mike Walker 453 22nd Ave SE St Pete FL 33705	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV MOORE, JENNIFER 2326 TROPICAL SHORES DR. S.E. ST. PETERSBURG, FL 33705	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV John J. Brink 2250 W Bay Isle Dr SE St Pete FL 33705	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	DT KNOWLTON, DAVID 2326 TROPICAL SHORES DR. S.E. ST. PETERSBURG, FL 33705	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	DT Laura J. Schaus 2250 W Bay Isle Dr SE St Pete FL 33705	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS LUTZO, MARY 2326 TROPICAL SHORES DR. S.E. ST. PETERSBURG, FL 33705	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS Marla Short 2501 W Bay Isle Dr SE St Pete FL 33705	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ANDERSON, JOYCE 2326 TROPICAL SHORES DR. S.E. ST. PETERSBURG, FL 33705	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Fred Williams 2295 W Bay Isle Dr SE St Pete FL 33705	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ASMAN, ULRICH 2326 TROPICAL SHORES DR. S.E. ST. PETERSBURG, FL 33705	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Jennifer Moore 538 25th Ave SE St Pete FL 33705	☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Laura Schaus 2-19-07 8132209112
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #