## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000006763

FILED Apr 02, 2010 Secretary of State

Entity Name: TROPICAL SHORES NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

2201 W BAY ISLE DR. SE ST. PETERSBURG, FL 33705

**Current Mailing Address: New Mailing Address:** 

2501 W BAY ISLE DR. SE ST. PETERSBURG, FL 33705

FEI Number: 20-3126014 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SHORT, MARLA 2501 W BAY ISLE DR SE ST. PETERSBURG, FL 33705 US

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:**

WILLIAMS, ALFRED L II Name: Address: 2295 WEST BAY ISLE DRIVE SE

City-St-Zip: ST PETE, FL 33705

Title: DV

Name: VESCOVO, MICHAEL

Address: 24 AVE. SE

City-St-Zip: ST PETE, FL 33705

Title: DT

SHORT, MARLA Name:

Address: 2501 W BAY ISLE DR. SE City-St-Zip: ST. PETERSBURG, FL 33705

Title: DS

Name: SCHAUS, LAURA

Address: 2250 W BAY ISLE DR SE City-St-Zip: ST. PETERSBURG, FL 33705

Title:

Name: BUCHSTEINER, LOU

2316 TROPICAL SHORES DRIVE Address: ST. PETERSBURG, FL 33705 City-St-Zip:

Title:

FELDMAN, HELEN Name: Address: 341 22ND AVENUE, SE ST. PETERSBURG, FL 33705 City-St-Zip:

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.

DP SIGNATURE: ALFRED L. WILLIAMS, II 04/02/2010