

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05974

**FILED**  
**Jun 20, 2012**  
**Secretary of State**

**Entity Name:** TROPIC VIEW CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3118 FLORIDA BLVD  
DELRAY BEACH, FL 33483 US

**New Principal Place of Business:**

**Current Mailing Address:**

2710 FLORIDA BLVD  
DELRAY BEACH, FL 33483 US

**New Mailing Address:**

**FEI Number:** 65-0037668

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WEXEL, STEVEN  
2710 FLORIDA BLVD.  
DELRAY BEACH, FL 33483 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: DP  
Name: GOLDMAN, DIANA  
Address: 3118 FLORIDA BLVD, #201  
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: DT  
Name: CONTE, JOSEPH  
Address: 701 AVENUE L APT A102  
City-St-Zip: DELRAY BEACH, FL 33483

Title: DS  
Name: GRIDLEY, JOAN  
Address: 3000 FLORIDA BLVD #D101  
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: DVP  
Name: DRESSEL, RICHARD  
Address: 4 PLYMOUTH PL  
City-St-Zip: MONTVALE, NJ 07645 US

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: DIANA GOLDMAN

DP

06/20/2012

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

\_\_\_\_\_  
Date