

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Sep 04, 2007
Secretary of State**

DOCUMENT# N06000001031

Entity Name: TROPIC TERRACE OF ST. AUGUSTINE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7245 A1A SOUTH
ST AUGUSTINE, FL 32080

New Principal Place of Business:

Current Mailing Address:

7245 A1A SOUTH
ST AUGUSTINE, FL 32080

New Mailing Address:

7245 A1A SOUTH
UNIT D
ST AUGUSTINE, FL 32080

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JONES, KATHERINE G
7245 A1A SOUTH
ST AUGUSTINE, FL 32080 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: D () Delete
Name: RADFORD, WINSTON SR
Address: 101 LANCASTER PLACE
City-St-Zip: ST AUGUSTINE, FL 32080

Title: D () Delete
Name: RADFORD, GRACE
Address: 101 LANCASTER PLACE
City-St-Zip: ST AUGUSTINE, FL 32080

Title: D () Delete
Name: RADFORD, WINSTON JR
Address: 101 LANCASTER PLACE
City-St-Zip: ST AUGUSTINE, FL 32080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: WINSTON RADFORD SR.

D

09/04/2007

Electronic Signature of Signing Officer or Director

_____ Date