

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000002132

FILED
Nov 03, 2008
Secretary of State

Entity Name: TROPICAL ATTITUDES AA INC.

Current Principal Place of Business:

5331 MAIN ST
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

Current Mailing Address:

PO BOX 598
NEW PORT RICHEY, FL 34654

New Mailing Address:

FEI Number: 83-0453974 FEI Number Applied For () 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:

JOHNSON, WILLIAM F
5844 FLORIDA AVE
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

GARGANO, VINCENT
1749 LADY PALM CT
TRINITY, FL 34655 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: VINCENT GARGANO

11/03/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: GARGANO, VINCENT
Address: 1749 LADY PALM CT
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: T () Delete
Name: JOHNSON, WILLIAM
Address: 5844 FLORIDA AVE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: C () Delete
Name: COKEDDALL, ROBERT J
Address: 5330 LUNN VISTA DR
City-St-Zip: NEW PORT RICHEY, FL 34652

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: GARGANO, VINCENT
Address: 1749 LADY PALM CT
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: S (X) Change () Addition
Name: WOJCIECHOWSKI, EDWARD
Address: 3524 EDENWOOD DR
City-St-Zip: HOLIDAY, FL 34691

Title: D (X) Change () Addition
Name: ORTIZ, RALPH
Address: 8604 GREAT EGRET TRACE
City-St-Zip: NEW PORT RICHEY, FL 34653

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: VINCENT GARGANO

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11/03/2008

Electronic Signature of Signing Officer or Director

Date