2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009347

Entity Name: TROPICAL CLOGGERS INC

FILED Apr 30, 2009 Secretary of State

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

1289 NW 7TH STREET BOCA RATON, FL 33486

Current Mailing Address: New Mailing Address:

1289 NW 7TH STREET BOCA RATON, FL 33486

FEI Number: 65-0980271 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:

POLLOCK, CAROLYN B 1289 NW 7TH STREET BOCA RATON, FL 33486 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:

Flateria Constant of Desirtant Asset

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

P () Delete Title: PD (X) Change () Addition

 Name:
 POLLOCK, CAROLYN B
 Name:
 POLLOCK, CAROLYN B

 Address:
 1289 NW 7TH STREET
 Address:
 1289 NW 7TH STREET

 City-St-Zip:
 BOCA RATON, FL 33486
 City-St-Zip:
 BOCA RATON, FL 33486

Title: S () Delete Title: SD (X) Change () Addition

 Name:
 ORSON, CLAIRE DR
 Name:
 ORSON, CLAIRE DR

 Address:
 3845 NW 95 TERRACE
 Address:
 3845 NW 95 TERRACE

 City-St-Zip:
 SUNRISE, FL 33351
 City-St-Zip:
 SUNRISE, FL 33351

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: CAROLYN B POLLOCK PD 04/30/2009