

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07989

FILED
Feb 08, 2010
Secretary of State

Entity Name: TROPICAL SUITE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

725 S.E. PORT ST. LUCIE BLVD.
SUITE 206
PORT ST. LUCIE, FL 34984

New Principal Place of Business:

725 S.E. PORT ST. LUCIE BLVD.
SUITE 106
PORT ST. LUCIE, FL 34984

Current Mailing Address:

725 S.E. PORT ST. LUCIE BLVD.
SUITE 206
PORT ST. LUCIE, FL 34984

New Mailing Address:

725 S.E. PORT ST. LUCIE BLVD.
SUITE 106
PORT ST. LUCIE, FL 34984

FEI Number: 65-0119628

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARMBRUSTER, MICHAEL
725 SE PORT ST. LUCIE BLVD.
SUITE 206
PORT ST. LUCIE, FL 34984 US

Name and Address of New Registered Agent:

BALL, RUTH A SECRTY
725 SE PORT ST. LUCIE BLVD.
SUITE 106
PORT ST. LUCIE, FL 34984 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: RUTH BALL

02/08/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: BINETTE, STEVEN PRES
Address: 725 SE PORT ST. LUCIE BV SUITE 101
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: SD
Name: BALL, RUTH A SECRTY
Address: 725 SE PSL BLVD., SUITE 106
City-St-Zip: PORT ST. LUCIE, FL 34984

Title: TD
Name: FENTON, NANCY TREAS
Address: 725 SE PORT ST. LUCIE BV SUITE 203
City-St-Zip: PORT SAINT LUCIE, FL 34984

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: RUTH BALL

SECY

02/08/2010

Electronic Signature of Signing Officer or Director

Date