

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36754

FILED
Jan 31, 2009
Secretary of State

Entity Name: TROPICAL POST CARD CLUB, INC.

Current Principal Place of Business:

POMPANO BEACH CIVIC CENTER
1801 NE 6 ST
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

6880 SOUTHWEST 75TH TERRACE
SOUTH MIAMI, FL 33143

New Mailing Address:

FEI Number: 65-0263144

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, THOMAS G.
6880 S.W. 75TH TERRACE
SOUTH MIAMI, FL 33143 US

Name and Address of New Registered Agent:

MOORE, THOMAS G
6880 S.W. 75TH TERRACE
SOUTH MIAMI, FL 33143 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: THOMAS G. MOORE

01/31/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MOORE, THOMAS G.,
Address: 6880 S.W. 75TH TERRACE
City-St-Zip: SOUTH MIAMI, FL

Title: D () Delete
Name: LADIN, BENJAMIN,
Address: C-2043 NEWCASTLE DRIVE
City-St-Zip: BOCA RATON, FL

Title: D () Delete
Name: MURPHY, SYLVIA
Address: 1501 NE 191 STREET APT 302C
City-St-Zip: MIAMI, FL 331794163

Title: D () Delete
Name: TRUTT, SANDRA
Address: 210 NW 77TH WAY
City-St-Zip: HOLLYWOOD, FL 330247053

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MOORE, THOMAS G
Address: 6880 S.W. 75TH TERRACE
City-St-Zip: SOUTH MIAMI, FL 33143 US

Title: D (X) Change () Addition
Name: LADIN, BENJAMIN
Address: C-2043 NEWCASTLE DRIVE
City-St-Zip: BOCA RATON, FL 33434 US

Title: D (X) Change () Addition
Name: MURPHY, SYLVIA
Address: 1501 NE 191 STREET APT 302C
City-St-Zip: MIAMI, FL 331794163 US

Title: D (X) Change () Addition
Name: TRUTT, SANDRA
Address: 210 NW 77TH WAY
City-St-Zip: HOLLYWOOD, FL 330247053 US

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: THOMAS G. MOORE

D

01/31/2009

Electronic Signature of Signing Officer or Director

Date