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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N43008 (4)

1. Corporation Name
TROPICAL ACRES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business: 1901 NE SAVANNAH ROAD, POST OFFICE BOX 3044 N/A, JENSEN BEACH FL 34658 US
Mailing Address: 1901 NE SAVANNAH ROAD, POST OFFICE BOX 3044 N/A, JENSEN BEACH FL 34658-3044 US

3. Date Incorporated or Qualified: 04/17/1991
3a. Date of Last Report: 04/16/1996

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

4. FEI Number: 65-0256938
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes

9. Name and Address of Current Registered Agent
PRESTIGE PROPERTY MGMT OF MARTIN COUNTY
3125 SW MAPP ROAD
46 NORTH WASHINGTON BOULEVARD, SUITE 1
PALM CITY FL 34990

10. Name and Address of New Registered Agent
81 Name: PRESTIGE PROPERTY MGMT OF MARTIN COUNTY
82 Street Address: 3125 SW MAPP ROAD
84 City: PALM CITY, FL 34990

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: [Signature] DATE: 2/27/97

Table 12: OFFICERS AND DIRECTORS. Lists names and addresses of current officers/directors with 'DELETE' checkboxes.

Table 13: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Lists names and addresses of new or changed officers/directors with 'Change' and 'Addition' checkboxes.

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: [Signature] DATE: 2-18-97

CR2E037 (9/96)