2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000036292

FILED Apr 11, 2006 Secretary of State

Entity Name: TROPICAL PROPERTIES OF WEST FLORIDA, INC.

Current Principal Place of Business:		New Principal Place of Business:		
_	INA DRIVE			
2 IOLMES I	BEACH, FL 3	4217		
Current Mailing Address:		ss:	New Mailing Address:	
P.O. BOX HOLMES I	1232 BEACH, FL 3	4218		
El Number	: 65-1004492	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
500 MAR	FER, GREG INA DRIVE, #			
IOLMES I	BEACH, FL 3	4217 03		
he above			purpose of changing its registere	ed office or registered agent, or both,
he above	named entity e of Florida.		purpose of changing its registere	ed office or registered agent, or both,
he above the State	named entity e of Florida. RE:			ed office or registered agent, or both, Date
he above the State	named entity e of Florida. RE: Electro	submits this statement for the		
he above the State GNATUI	named entity e of Florida. RE: Electro	submits this statement for the nic Signature of Registered Ag	gent	
he above the State IGNATUI Iection Car OFFICER: tte: ame: ddress:	named entity e of Florida. RE: Electro mpaign Financir	submits this statement for the nic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete , SHEILA RLINE RD.	gent	Date
he above the State GNATUI	named entity of Florida. RE: Electro mpaign Financir S AND DIRECT PD (OBERHOFER, 17525 WATER BRADENTON,	submits this statement for the nic Signature of Registered Againg Trust Fund Contribution (). CTORS:) Delete , SHEILA RLINE RD. FL 34212) Delete CABETH A	gent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHEILA OBERHOFER P 04/11/2006