

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000000357

FILED
Apr 10, 2009
Secretary of State

Entity Name: TROPICAL PAVERS OF JACKSONVILLE, INC.

Current Principal Place of Business:

4915 BEACH BLVD, STE 4
JACKSONVILLE, FL 32207 48

New Principal Place of Business:

Current Mailing Address:

4915 BEACH BLVD, STE 4
JACKSONVILLE, FL 32207 48

New Mailing Address:

FEI Number: 65-1178236

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHEN E. TILLEY, PA, CPA
4465 BAYMEADOWS ROAD
STE. 3
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BATMAN, DARRELL
Address: 13834 SEVEN PINES DRIVE
City-St-Zip: JACKSONVILLE, FL 32224

Title: SEC () Delete
Name: BURDINE, RANDY
Address: 348 FLEMING FOREST LANE
City-St-Zip: ORANGE PARK, FL 32003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RANDY BURDINE

SEC

04/10/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date