

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000144083

Entity Name: TROPICALIA, INC.

FILED
Feb 06, 2009
Secretary of State

Current Principal Place of Business:

3500 PEACE RIVER DRIVE
PUNTA GORDA, FL 33983

New Principal Place of Business:

Current Mailing Address:

3500 PEACE RIVER DRIVE
PUNTA GORDA, FL 33983

New Mailing Address:

FEI Number: 20-0462643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, J. DAVID EA
2511 VASCO STREET
STE 115
PUNTA GORDA, FL 33950 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: PRES () Delete
Name: LAVOIE, VICTORIA
Address: 3500 PEACE RIVER DRIVE
City-St-Zip: PUNTA GORDA, FL 33983

Title: VICE () Delete
Name: MCSWEENEY, ITA
Address: 3500 PEACE RIVER DRIVE
City-St-Zip: PUNTA GORDA, FL 33983

Title: SEC () Delete
Name: MCSWEENEY, OONA
Address: 3500 PEACE RIVER DR
City-St-Zip: PUNTA GORDA, FL 33983

Title: TREA () Delete
Name: LAVOIE, VICTORIA
Address: 3500 PEACE RIVER DR
City-St-Zip: PUNTA GORDA, FL 33983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC (X) Change () Addition
Name: LAVOIE, VICTORIA
Address: 3500 PEACE RIVER DR
City-St-Zip: PUNTA GORDA, FL 33983

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: VICTORIA LAVOIE

PRES

02/06/2009

Electronic Signature of Signing Officer or Director

_____ Date