2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2007
Secretary of State

DOCUMENT# P03000151569

Entity Name: TROPICAL PARADISE MANAGEMENT, INC.

Current Principal Place of Business:

PO BOX 6424
TALLAHASSEE, FL 32314

New Principal Place of Business:

1010 WINFIELD FOREST DRIVE
TALLAHASSEE, FL 32317

Current Mailing Address:

PO BOX 6424
TALLAHASSEE, FL 32314

New Mailing Address:

FEI Number: 55-0801994 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JAMES, THOMAS R
1412 RUSSELL STREET
TALLAHASSEE, FL 32310 US

Name and Address of New Registered Agent:

JAMES, THOMAS R
1010 WINFIELD FOREST DRIVE
TALLAHASSEE, FL 32317 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: _____ 02/17/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: JAMES, THOMAS R
Address: PO BOX 6424
City-St-Zip: TALLAHASSEE, FL 32314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: THOMAS JAMES PRES 02/17/2007
Electronic Signature of Signing Officer or Director — Date