

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000058000

**FILED**  
**Jan 08, 2011**  
**Secretary of State**

**Entity Name:** TROPICAL COAST REALTY REFERRALS, INC.

**Current Principal Place of Business:**

1811 ENGLEWOOD ROAD  
#251  
ENGLEWOOD, FL 34223 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1617  
ENGLEWOOD, FL 34295

**New Mailing Address:**

**FEI Number:** 20-0977956

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BROWNE, JEFFRY S DPST  
1811 ENGLEWOOD ROAD  
#251  
ENGLEWOOD, FL 34223 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

**OFFICERS AND DIRECTORS:**

**Title:** DPST  
**Name:** BROWNE, JEFFRY S  
**Address:** POB 1617  
**City-St-Zip:** ENGLEWOOD, FL 34295

I hereby 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 all other like empowered.

**SIGNATURE:** JEFFRY BROWNE

DPST

01/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date