

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000161685

FILED
Jul 09, 2005
Secretary of State

Entity Name: TROPICAL COAST OF MIAMI BEACH, INC.

Current Principal Place of Business:

105 CANNON COURT WEST
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

105 CANNON COURT WEST
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 20-2110180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATTINGER, FRANK
105 CANNON COURT WEST
PONTE VEDRA BEACH, FL 32082 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Change (X) Addition
Name: FRANK, BEAVEN SMITH
Address: 1644 DUKE OF WINDSOR ROAD
City-St-Zip: VIRGINIA BEACH, VA 23454

Title: D () Change (X) Addition
Name: SKIP, ATTINGER
Address: 105 CANNON COURT, WEST
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Change (X) Addition
Name: BOBBY, SMITH
Address: 3057 NE 49TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33308

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SKIP ATTINGER

D

07/09/2005

Electronic Signature of Signing Officer or Director

Date