2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000031528

Entity Name: TROPICAL BEACH WEDDINGS, INC.

1527 WINDING SHORE DR

GULF BREEZE, FL 32563

Address:

City-St-Zip:

FILED Aug 21, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8437 GULF BLVD SUITE B2 NAVARRE BEACH, FL 32566 **New Mailing Address: Current Mailing Address:** 1527 WINDING SHORE DR GULF BREEZE, FL 32563 FEI Number: 20-2421884 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PORATH, SHANNON L 56 SPIRÉS LANE 16A SANTA ROSA BEACH, FL 32459 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CAPPELLA, CECELIA Name: Name: 1527 WINDING SHORE DR Address: Address: City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: Title: VΡ Title: () Change () Addition () Delete Name: CAPPELLA, MICHAEL 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: CECELIA A. CAPPELLA PRES 08/21/2008