2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000031528

Entity Name: TROPICAL BEACH WEDDINGS, INC.

1527 WINDING SHORE DR

City-St-Zip: GULF BREEZE, FL 32563

Address:

FILED Apr 27, 2009 Secretary of State

Current P	rincipal Place	e of Business:	New Principal Place of Business:		
8437 GULF BLVD SUITE B2 NAVARRE BEACH, FL 32566			8486 NAVARRE PKWY NAVARRE, FL 32566	,	
Current M	lailing Addre	ss:	New Mailing Address	New Mailing Address:	
	DING SHORE EEZE, FL 325				
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:	
56 SPIRES 16A		FL 32459 US			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (CAPPELLA, CI 1527 WINDING GULF BREEZE	SHORE DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VP () Delete	Title:	() Change () Addition	

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 04/27/2009