

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000099254

**FILED**  
**Jan 18, 2012**  
**Secretary of State**

**Entity Name:** TROPIC TOUCH, INC.

**Current Principal Place of Business:**

49 SW SEMINOLE STREET  
102  
STUART, FL 34994

**New Principal Place of Business:**

**Current Mailing Address:**

1315 NE OAK LANE DRIVE  
JENSEN BEACH, FL 34957

**New Mailing Address:**

**FEI Number:** 80-0298079

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CROWELL, LISA  
1315 NE OAK LANE DRIVE  
JENSEN BEACH, FL 34957 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: P, S  
Name: CROWELL, LISA  
Address: 1315 NE OAK LANE DRIVE  
City-St-Zip: JENSEN BEACH, FL 34957

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: LISA CROWELL

P, S

01/18/2012

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

\_\_\_\_\_  
Date