2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2011
Secretary of State

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Entity Name: TOM'S TROPIC AIR, INC.

Current Principal Place of Business:

604 COMMERCIAL DRIVE
HOLLY HILL, FL 32117 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 634
ORMOND BEACH, FL 32175 US

New Mailing Address:

FEI Number: 59-3335028 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOSE, JAMES
4708 STATE ROAD 13
SAINT JOHNS, FL 32259 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: PD
Name: MOSE, THOMAS A
Address: 815 ALCAZAR AVE.
City-St-Zip: ORMOND BEACH, FL 32174

Title: VD
Name: MOSE, KATHLEEN P .
Address: 815 ALCAZAR AVE.
City-St-Zip: ORMOND BEACH, FL 32174

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: KATHLEEN P MOSE VD 01/12/2011

Electronic Signature of Signing Officer or Director Date