2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2006
Secretary of State

DOCUMENT# P97000078694

Entity Name: TROPICAL TRADERS LIMITED, INC.

Current Principal Place of Business:

1320 NW 42ND ST
WINTER HAVEN, FL 33831 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 40
HIGHLAND CITY, FL 33846 US

New Mailing Address:

FEI Number: 59-3470514 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PARKER, LEROY C III
2910 LAKE COURT
LAKELAND, FL 33813 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VD ( ) Delete
Name: PARKER, ROBERTA W
Address: 2910 LAKE COURT
City-St-Zip: LAKELAND, FL 33813

Title: PD ( ) Delete
Name: PARKER, LEROY C III
Address: 2910 LAKE COURT
City-St-Zip: LAKELAND, FL 33813

Title: TD ( ) Delete
Name: PARKER, DUANE L
Address: 1810 LOWRY AVENUE
City-St-Zip: LAKELAND, FL 33801

Title: SD ( ) Delete
Name: PARKER, LEANN P
Address: 115 112TH AVE NE #716
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: D ( ) Delete
Name: PARKER, ANDREW T
Address: 4220 SUMMER LANDING DR
City-St-Zip: LAKELAND, FL 33810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change ( ) Addition
Name: PARKER, DUANE L
Address: 1810 LOWRY AVE
City-St-Zip: LAKELAND, FL 33801

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: PARKER, ANDREW T
Address: 4617 S. DEVON AVE
City-St-Zip: LAKELAND, FL 33813

I hereby certify that the information supplied with this filing does not qualify for the 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: LEROY C. PARKER 111 PD 03/21/2006

Electronic Signature of Signing Officer or Director Date