

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000108102

Entity Name: TROPICAL LANDHOLDINGS, INC.

FILED  
Apr 29, 2008  
Secretary of State

## Current Principal Place of Business:

8252 WILTSHIRE  
PORT CHARLOTTE, FL 33981

## New Principal Place of Business:

## Current Mailing Address:

8252 WILTSHIRE  
PORT CHARLOTTE, FL 33981

## New Mailing Address:

FEI Number: 65-0802638

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HALVORSON, RICHARD  
9 LONG MEADOW PLACE  
ROTONDA WEST, FL 33947 US

## Name and Address of New Registered Agent:

HALVORSON, RICHARD  
11590 BRIDLE PATH LANE  
PLACIDA, FL 33946 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: RICHARD HALVORSON

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: A ( ) Delete  
Name: WAPINSKI, GARY  
Address: 55 OAKS RD  
City-St-Zip: PALOS PARK, IL 60464

Title: D ( ) Delete  
Name: HALVORSON, RICHARD  
Address: 9 LONG MEADOW PL  
City-St-Zip: ROTONDA WEST, FL 33947

Title: D ( ) Delete  
Name: FULLENCAMP, DENNIS  
Address: 2911 PINE ISLAND ROAD  
City-St-Zip: CAPE CORAL, FL

Title: S ( ) Delete  
Name: BOWEN, PATSY  
Address: 3373 GRAND VISTA CT., #201  
City-St-Zip: PORT CHARLOTTE, FL 33953

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: HALVORSON, RICHARD  
Address: 11590 BRIDLE PATH LANE  
City-St-Zip: PLACIDA, FL 33946

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

Title: ( ) Change ( ) Addition  
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: RICHARD HALVORSON

TRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date