2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000108102

BOWEN, PATSY

3373 GRAND VISTA CT., #201

PORT CHARLOTTE, FL 33953

Name:

Address:

City-St-Zip:

Entity Name: TROPICAL LANDHOLDINGS, INC

FILED Apr 30, 2009 Secretary of State

| Littly Nai | ille. TROFIC. | AL LANDHOLDINGS, INC. | | | |
|--|--|--------------------------------|---|--|--|
| Current Principal Place of Business: | | | New Principal | New Principal Place of Business: | |
| 8252 WILTSHIRE PORT CHARLOTTE, FL 33981 | | | BOX 3813 | 11590 BRIDLE PATH LANE BOX 3813 PLACIDA, FL 33946 | |
| Current Mailing Address: | | | New Mailing A | New Mailing Address: | |
| 8252 WILTSHIRE PORT CHARLOTTE, FL 33981 | | | 11590 BRIDLE PATH LANE BOX 3813 PLACIDA, FL 33946 | | |
| FEI Number | : 65-0802638 | FEI Number Applied For () | FEI Number Not Applicabl | e () Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Add | Name and Address of New Registered Agent: | |
| HALVORSON, RICHARD 11590 BRIDLE PATH LANE PLACIDA, FL 33946 US | | | 11590 BRIDLÉ BOX 3813 | HALVORSON, RICHARD 11590 BRIDLE PATH LANE BOX 3813 PLACIDA, FL 33946 US | |
| | e named entity e of Florida. | submits this statement for the | purpose of changing its re | gistered office or registered agent, or both, | |
| SIGNATURE: | | | | 04/30/2009 | |
| | Electro | nic Signature of Registered Ag | ent | Date | |
| Election Car | mpaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/C | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | |
| Title: Name: Address: City-St-Zip: | A (WAPINSKI, GA 55 OAKS RD PALOS PARK, | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D (HALVORSON, 11590 BRIDLE PLACIDA, FL | PATH LANE | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | FULLENCAMP 2911 PINE ISL | AND ROAD | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: | s (|) Delete | Title: | () Change () Addition | |

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.

Name:

Address:

City-St-Zip:

SIGNATURE: RICHARD HALVORSON D 04/30/2009