2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000017968

Entity Name: TROPICAL ENTERPRISES & DEVELOPMENT, INC.

FILED Mar 30, 2009 Secretary of State

Current Principal Place of Business:			New Principal F	New Principal Place of Business:	
150 MAGNOLIA AVE. DAYTONA BEACH, FL 32114				2326 BELLEVUE AVENUE DAYTONA BEACH, FL 32114	
Current Mailing Address:			New Mailing Ac	New Mailing Address:	
150 MAGNOLIA AVE. DAYTONA BEACH, FL 32114				2326 BELLEVUE AVENUE DAYTONA BEACH, FL 32114	
FEI Number:	59-3509622	FEI Number Applied For()	FEI Number Not Applicable	() Certificate of Status Desired ()	
Name and	Address of 0	Current Registered Agent:	Name and Addr	ess of New Registered Agent:	
		SERVICES, INC.			
150 MAGN DAYTONA		321152491 US			
The above in the State		submits this statement for the p	urpose of changing its reg	stered office or registered agent, or both,	
SIGNATUR					
	Electror	nic Signature of Registered Age	nt	Date	
Election Cam	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	*		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D/P (YELVINGTON, 2326 BELLEVU DAYTONA BEA	JE AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D/VP (YELVINGTON, 2326 BELLEVU DAYTONA BEA	JE AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D/S (YELVINGTON, 2326 BELLEVU DAYTONA BEA	JE AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T (YELVINGTON, 2326 BELLEVU DAYTONA BEA	JE AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CFO (X KLEBE, MARK 2326 BELLEVU DAYTONA BEA	JE AVENUE	Title: Name: Address: City-St-Zip:	()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.

SIGNATURE: GARY YELVINGTON P 03/30/2009