

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000062974

FILED
Apr 03, 2009
Secretary of State

Entity Name: TROPICAL RESORT SERVICES OF MANATEE INC.

Current Principal Place of Business:

15560-7 MCGREGOR BLVD.
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8417
FORT MYERS, FL 33908 US

New Mailing Address:

P.O. BOX 8117
LONGBOAT KEY, FL 34228 US

FEI Number: 65-0931310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BARBOUR, JOHN D
15560-7 MCGREGOR BLVD.
FORT MYERS, FL 33908 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: P () Delete
Name: BARBOUR, JOHN
Address: 5914 CHAPARRAL AVE.
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BARBOUR, JOHN D
Address: 5914 CHAPARRAL AVE.
City-St-Zip: SARASOTA, FL 34243

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: JOHN BARBOUR

P

04/03/2009

Electronic Signature of Signing Officer or Director

Date