

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V00450

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Entity Name:** TROPICAL SECURITY, INC.

**Current Principal Place of Business:**

3031 FORTUNE WAY, SUITE 11  
WELLINGTON, FL 33414 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 213247  
ROYAL PALM BEACH, FL 33421 US

**New Mailing Address:**

**FEI Number:** 65-0300905

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HORTON, SUSAN R VICE PR  
3683 WOODS WALK BLVD  
LAKE WORTH, FL 33467 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

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** HORTON, RAYMOND W PRESIDE  
**Address:** 3683 WOODS WALK BLVD  
**City-St-Zip:** LAKE WORTH, FL 33467

**Title:** VP  
**Name:** HORTON, SUSAN R VP  
**Address:** 3683 WOODS WALK BLVD  
**City-St-Zip:** LAKE WORTH, FL 33467

I hereby 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 all other like empowered.

**SIGNATURE:** SUSAN HORTON

VP

04/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date