

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2001 8:00 am
Secretary of State
 04-09-2001 90059 025 ***150.00

0320477

DOCUMENT # V00451

1. Entity Name
TROPICAL LOCK & SECURITY, INC.

Principal Place of Business
 11360 FORTUNE CIRCLE
 SUITE 6A
 WEST PALM BEACH FL 33414
 US

Mailing Address
 11360 FORTUNE CIRCLE
 SUITE 6A
 WEST PALM BEACH FL 33414
 US

2. Principal Place of Business
8732 Palomino Dr

3. Mailing Address
Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Lake Worth FL

City & State

4. FEI Number **65-0300905**

Applied For
 Not Applicable

Zip
33467

Country
US

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HORTON, SUSAN
9622 EAGLE POINT LANE 8732 Palomino Dr
LAKE WORTH FL 33467

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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 **Susan Horton**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **HORTON, SUSAN**
 STREET ADDRESS **9622 EAGLE POINT LANE 8732 Palomino Dr**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

TITLE ☒ Change ☐ Addition
 NAME **Susan Horton**
 STREET ADDRESS **9622 EAGLE POINT LANE 8732 Palomino Dr**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

TITLE **D** ☐ Delete
 NAME **HORTON, RAY**
 STREET ADDRESS **9622 EAGLE POINT LANE 8732 Palomino Dr**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

TITLE ☒ Change ☐ Addition
 NAME **Ray Horton**
 STREET ADDRESS **9622 EAGLE POINT LANE 8732 Palomino Dr**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Susan Horton VP** **Susan Horton** **4-6-01** **561-433-3933**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)