

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V22514

FILED
Jan 10, 2005
Secretary of State

Entity Name: TROPICAL INDUSTRIES, INC.

Current Principal Place of Business:

4822 PALM BEACH BLVD.
FT MYERS, FL

New Principal Place of Business:

4822 PALM BEACH BLVD.
FT MYERS, FL 33905 US

Current Mailing Address:

4822 PALM BEACH BLVD.
FT MYERS, FL 33905 US

New Mailing Address:

FEI Number: 65-0325418 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, PAUL S.
4822 PALM BEACH BLVD.
FT MYERS, FL 33905 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: PTD () Delete
Name: MURPHY, PAUL S.,
Address: 13520 CARRIBEAN BLVD SE
City-St-Zip: FT MYERS, FL

Title: SVD () Delete
Name: MURPHY, CAROLE S.,
Address: 13520 CARRIBEAN BLVD SE
City-St-Zip: FT MYERS, FL

Title: VP () Delete
Name: MURPHY, MARK
Address: 1802 SE 2ND STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MURPHY, PAUL S.,
Address: 13520 CARRIBEAN BLVD SE
City-St-Zip: FT MYERS, FL 33905 US

Title: SVD (X) Change () Addition
Name: MURPHY, CAROLE S.,
Address: 13520 CARRIBEAN BLVD SE
City-St-Zip: FT MYERS, FL 33905 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T () Change (X) Addition
Name: ZELLER, SHIRLEY G
Address: 10290 BAYSHORE ROAD
City-St-Zip: N. FT. MYERS, FL 33917 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAUL S MURPHY

PRES

01/10/2005

Electronic Signature of Signing Officer or Director

_____ Date