

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726723

Entity Name: TROPIC GROVES RECREATION CENTER, INC.

Current Principal Place of Business:

1166 6TH AVE
VERO BEACH, FL 32960

Current Mailing Address:

C/O ELLIOTT MERRILL COMMUNITY MGMT
835 20TH PLACE
VERO BEACH, FL 32960 US

FEI Number: 59-1708231

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCKINNON, CHARLES W
3055 CARDINAL DRIVE, SUITE 302
VERO BEACH, FL 32963 US

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

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name RICCIO, MARTIN
Address 1166 6TH AVENUE #9B
City-State-Zip: VERO BEACH FL 32960

Title VP, DIRECTOR
Name FERRIS, MARY JEAN
Address 1166 6TH AVENUE #10D
City-State-Zip: VERO BEACH FL 32960

Title SECRETARY, DIRECTOR
Name RIVAS, ROBERT
Address 1166 6TH AVENUE #19B
City-State-Zip: VERO BEACH FL 32960

Title TREASURER, DIRECTOR
Name SARACCO, RUTH
Address 1166 6TH AVENUE #16C
City-State-Zip: VERO BEACH FL 32960

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RUTH SARACCO

TREASURER

04/11/2017

Electronic Signature of Signing Officer/Director Detail

Date