

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734656

Entity Name: TROPIC TERRACE GARDENS CONDOMINIUM ASSOCIATION, INC.**FILED**
Jan 31, 2017
Secretary of State
CC1765403194**Current Principal Place of Business:**14360 S TAMIAMI TRAIL
B
FORT MYERS, FL 33912**Current Mailing Address:**14360 S TAMIAMI TRAIL
B
FORT MYERS, FL 33912 US**FEI Number: 59-1643819****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SAPP, PAUL
14360 S TAMIAMI TRAIL
B
FORT MYERS, FL 33912 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 P
Name VAN SLEET, DAN
Address 14360 S TAMIAMI TRAIL B
City-State-Zip: FORT MYERS FL 33912Title T
Name CHAPRNKA, CONNIE
Address 14360 S TAMIAMI TRAIL B
City-State-Zip: FORT MYERS FL 33912Title S
Name SWEENEY, KATHLEEN
Address 14360 S TAMIAMI TRAIL B
City-State-Zip: FORT MYERS FL 33912Title D
Name JOINER, RICHARD
Address 14360 S TAMIAMI TRAIL B
City-State-Zip: FORT MYERS FL 33912Title D
Name WARRINER, CONNIE
Address 14360 S TAMIAMI TRAIL B
City-State-Zip: FORT MYERS FL 33912Title VP
Name WILLIAMS, VERN
Address 14360 TAMIAMI TR B
City-State-Zip: FT MYERS FL 33912Title DIRECTOR
Name CASSIDY, ROBERT
Address 14360 S. TAMIAMI TRAIL
UNIT B
City-State-Zip: FORT MYERS FL 33912

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: DANIEL VAN SLEET**PRESIDENT****01/31/2017**

Electronic Signature of Signing Officer/Director Detail

Date