2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2018
Secretary of State
CC2521414328

DOCUMENT# 748671

Entity Name: TROPIC VILLAS NORTH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1170 SIXTH AVENUE
VERO BEACH, FL 32960

Current Mailing Address:

C/O VESTA PROPERTY SERVICES
333 17TH STREET SUITE A
VERO BEACH, FL 32960 US

FEI Number: 59-1971217

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHARLES W. MCKINNON, P.L.
3055 CARDINAL DR.,
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	Title	TREASURER, DIRECTOR
Name	JONES, PATRICIA	Name	NOLTE, BARBARA
Address	C/O VESTA PROPERTY SERVICES 333 17TH STREET SUITE A	Address	C/O VESTA PROPERTY SERVICES 333 17TH STREET SUITE A
City-State-Zip:	VERO BEACH FL 32960	City-State-Zip:	VERO BEACH FL 32960
Title	SECRETARY, DIRECTOR	Title	VICE PRESIDENT
Name	REHAK, LILI	Name	MORAN, NICOLE
Address	C/O VESTA PROPERTY SERVICES 333 17TH STREET SUITE A	Address	C/O VESTA PROPERTY SERVICES 333 17TH STREET SUITE A
City-State-Zip:	VERO BEACH FL 32960	City-State-Zip:	VERO BEACH FL 32960
Title	DIRECTOR		
Name	LYE, GEORGE		
Address	C/O VESTA PROPERTY SERVICES 333 17TH STREET SUITE A		
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: PATRICIA JONES PRESIDENT 01/24/2018

Electronic Signature of Signing Officer/Director Detail — Date