2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2016
Secretary of State
CC8192876082

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Entity Name: TROPICAL COVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

396 YELLOW TAIL LANE
MERRITT ISLAND, FL 32953

Current Mailing Address:

8660 ASTRONAUT BLVD
208
CAPE CANAVERAL, FL 32920 US

FEI Number: 20-3073869

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHOWCASE PROPERTY MANAGEMENT
C/O KAREN GUNN-BARDOT
8660 ASTRONAUT BLVD SUITE 208
CAPE CANAVERAL, FL 32920 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: KAREN GUNN-BARDOT 03/16/2016

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	TREASURER	Title	PRESIDENT
Name	REID, JIM	Name	BOWLER, YOLANDA
Address	400 YELLOW TAIL, #105	Address	2461 HEMINGWAY LANE, #101
City-State-Zip:	MERRITT ISLAND FL 32953	City-State-Zip:	MERRITT ISLAND FL 32953
Title	VP	Title	SECRETARY
Name	TROUT, MARK	Name	MURRAY, DON
Address	411 YELLOW TAIL, #106	Address	2460 HEMMINGWAY LANE #104
City-State-Zip:	MERRITT ISLAND FL 32953	City-State-Zip:	MERRITT ISLAND FL 32953

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: YOLANDA BOWLER PRESIDENT 03/16/2016

Electronic Signature of Signing Officer/Director Detail — Date