

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07835

Entity Name: TROPICAL HARBOR MOBILE HOMEOWNERS ASSOCIATION, INC.

FILED
Mar 30, 2015
Secretary of State
CC3395631896

Current Principal Place of Business:

27 RICKERT DRIVE
LAKE PLACID, FL 33852

Current Mailing Address:

27 RICKERT DRIVE
LAKE PLACID, FL 33852 US

FEI Number: 59-2522188

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOLAND, FREDERICK G II
125 BEAUCHAMP ST
LAKE PLACID, FL 33852 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: FREDERICK G FOLAND II

03/30/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name FOLAND, FREDERICK G II
Address 125 BEAUCHAMP ST
City-State-Zip: LAKE PLACID FL 33852

Title VP
Name WACKERSHOUSER , LOUIS F
Address 231 BEAUREGARD ST
City-State-Zip: LAKE PLACID FL 33852

Title TREASURER
Name HOOVER, THOMAS
Address 309 BEAUVILLE ST.
City-State-Zip: LAKE PLACID FL 33852

Title SECRETARY
Name ECHELBERRY , VICKIE
Address 405 BEAVER RUN ST
City-State-Zip: LAKE PLACID FL 33852

Title MEMBERSHIP
Name FAZIO, ALICE
Address 305 BEAUVILLE ST
City-State-Zip: LAKE PLACID FL 33852

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: FREDERICK G FOLAND II

PRESIDENT

03/30/2015

Electronic Signature of Signing Officer/Director Detail

Date