

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08657

**Entity Name:** TROPIC TERRACE RECREATION ASSOCIATION OF LEE COUNTY, INC.

**FILED**  
**Feb 06, 2019**  
**Secretary of State**  
**0040968723CC**

**Current Principal Place of Business:**

14360 S. TAMIAMI TRAIL  
UNIT B  
FORT MYERS, FL 33912

**Current Mailing Address:**

14360 S TAMIAMI TRAIL  
UNIT B  
FT MYERS, FL 33912 US

**FEI Number: 59-2525711**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SAPP, PAUL  
14360 S TAMIAMI TRAIL  
UNIT 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            PRESIDENT  
Name            DUBEY, ROBERT  
Address        14360 TAMIAMI TR B  
City-State-Zip: FT MYERS FL 33912

Title            3VC  
Name            DECHENE, MARLANE  
Address        14360 TAMIAMI TR B  
City-State-Zip: FT MYERS FL 33912

Title            5VC  
Name            NOE, SUE  
Address        14360 TAMIAMI TR B  
City-State-Zip: FT MYERS FL 33912

Title            1VC  
Name            BOCHNIARZ, TONY  
Address        14360 TAMIAMI TR B  
City-State-Zip: FT MYERS FL 33912

Title            2VC  
Name            JOINER, RICHARD  
Address        14360 TAMIAMI TR B  
City-State-Zip: FT MYERS FL 33912

Title            4VC  
Name            BLANCHETTE, DANIEL  
Address        14360 TAMIAMI TR B  
City-State-Zip: FT 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: ROBERT DUBEY**

**PRESIDENT**

**02/06/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date