2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F56767

FILED Apr 29, 2008 Secretary of State

Entity Name: TIVOLI	REALTY, INC.			
Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
2127 RINGLING BLVD SUITE 102 SARASOTA, FL 3423		1765 RINGLING BLVD SUITE 300 SARASOTA, FL 34236	US	
Current Mailing Address:		New Mailing Address:		
2127 RINGLING BLVD SUITE 102 SARASOTA, FL 3423		1765 RINGLING BLVD SUITE 300 SARASOTA, FL 34236	US	
FEI Number: 59-2150534	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of N	Name and Address of New Registered Agent:	
VENABLE, JOSEPH P 1400 4TH AVE W. BRADENTON, FL 342				
The above named entiin the State of Florida.	ty submits this statement for the	purpose of changing its registered o	ffice or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		ent	Date	
Election Campaign Financ	cing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: TD Name: RIVOLTA, Pl Address: 215 ROBIN		Title: TD (X) Name: RIVOLTA, PIER Address: 1765 RINGLING		

Name:

City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34236 () Delete Title: (X) Change () Addition

RIVOLTA, PIERO RIVOLTA, PIERO Name:

Address: 215 ROBIN DRIVE Address: 1765 RINGLING BLVD, #300 SARASOTA, FL 34236 SARASOTA, FL 34236 City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change () Addition

Name: VENABLE, JOSEPH P. Name: Address: 1400 4TH AVE W Address: City-St-Zip: BRANDENTON, FL City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PIERO RIVOLTA TD 04/29/2008