

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 24, 2004 8:00 am
Secretary of State

05-24-2004 90008 008 ***550.00

DOCUMENT # F96000000721

1. Entity Name
TGF CORPORATION



Principal Place of Business
1110 EUCLID AVE., STE. 300
CLEVELAND, OH 44115-603 US

Mailing Address
1110 EUCLID AVE., STE. 300
CLEVELAND, OH 44115-603 US

14022794



2. Principal Place of Business
4875 PELICAN COLONY BLVD

3. Mailing Address
4875 PELICAN COLONY BLVD

Suite, Apt. #, etc.
1001

Suite, Apt. #, etc.
1001

04102004 Chg-P CR2E034 (10/03)

City & State
BONITA SPRINGS FL

City & State
BONITA SPRINGS FL

4. FEI Number
34-1818086

Applied For
☐ Not Applicable

Zip
34134

Country
USA

Zip
34134

Country
USA

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CALABRESE, STEVEN A
THE GRANDE ON SAND KEY III
1170 GULF BLVD UNIT 1505
CLEARWATER, FL 33767

7. Name and Address of New Registered Agent

Name
STEVEN A. CALABRESE

Street Address (P.O. Box Number is Not Acceptable)
4875 PELICAN COLONY BLVD. #1001

City
BONITA SPRINGS FL Zip Code
34134

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
CALABRESE, STEVEN A ☐ Delete
1110 EUCLID AVE., STE. 300
CLEVELAND, OH 44115

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T
CALABRESE, STEVEN A ☐ Delete
1110 EUCLID AVE., STE. 300
CLEVELAND, OH 44115

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

S
CALABRESE, ERIC M ☐ Delete
1110 EUCLID AVE., STE. 300
CLEVELAND, OH 44115

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PRESIDENT ☒ Change ☐ Addition
STEVEN A. CALABRESE
4875 PELICAN COLONY BLVD #1001
BONITA SPRINGS FL 34134

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TREASURER ☒ Change ☐ Addition
STEVEN A. CALABRESE
4875 PELICAN COLONY BLVD #1001
BONITA SPRINGS FL 34134

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #