

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 10, 2004 8:00 am**  
**Secretary of State**

02-10-2004 90033 037 \*\*\*150.00

**DOCUMENT # F99000004039**

1. Entity Name  
**HOME DEVCO/TIVOLI, INC.**



Principal Place of Business <b>15340 JOG RD 100 DELRAY BEACH, FL 33446</b>	Mailing Address <b>15340 JOG RD 100 DELRAY BEACH, FL 33446</b>
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**94013164**



01082004 Chg-P CR2E034 (10/03)

2. Principal Place of Business <b>5350 W. Atlantic Ave. Suite/Apt. #, etc. 100 City &amp; State Delray Beach, FL Zip 33484</b>	3. Mailing Address <b>5350 W. Atlantic Ave. Suite/Apt. #, etc. 100 City &amp; State Delray Beach, FL Zip 33484</b>
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4. FEI Number <b>06-1553549</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324**

**7. Name and Address of New Registered Agent**

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	<b>FL</b> Zip Code

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	PD <b>STEINBERG, ANDREW</b> <b>15340 JOG ROAD, STE 100</b> <b>DELRAY BEACH, FL 33446</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <b>PACOCHA, STEPHEN</b> <b>15340 JOG RD, STE 100</b> <b>DELRAY BEACH, FL 33446</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <b>SWARTZ, RICHARD</b> <b>15340 JOG RD, STE 100</b> <b>DELRAY BEACH, FL 33446</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE PD NAME STREET ADDRESS CITY-ST-ZIP	<b>Steinberg, Andrew</b> <b>5350 W. Atlantic Ave. Suite 100</b> <b>Delray Beach, FL 33484</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE S NAME STREET ADDRESS CITY-ST-ZIP	<b>Pacocha, Stephen F.</b> <b>5350 W. Atlantic Ave. Suite 100</b> <b>Delray Beach, FL 33484</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE TD NAME STREET ADDRESS CITY-ST-ZIP	<b>Swartz, Richard</b> <b>5350 W. Atlantic Ave. Suite 100</b> <b>Delray Beach, FL 33484</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: **Stephen F. Pacocha, S**  
**Home Devco Tivoli Inc.** **1-29-04**

Date **561 638 3600**  
Daytime Phone #