2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 06, 2004
Secretary of State

DOCUMENT# L01000016683

Entity Name: BOYLE TIVOLI, LLC

Current Principal Place of Business:

1601 EAST LAKE DRIVE
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

300 NORTH OCEAN BLVD.
DEERFIELD BEACH, FL 33441

Current Mailing Address:

1601 EAST LAKE DRIVE
FORT LAUDERDALE, FL 33316

New Mailing Address:

300 NORTH OCEAN BLVD.
DEERFIELD BEACH, FL 33441

FEI Number: 03-0397391 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOYLE, JOHN J
1601 E LAKE DR
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: MEM ( ) Delete
Name: BOYLE, JOHN J
Address: 1601 EAST LAKE DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: MEM ( ) Delete
Name: BOYLE, JANET
Address: 1601 EAST LAKE DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33316

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: BOYLE, JOHN J
Address: 1601 EAST LAKE DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: MGR (X) Change ( ) Addition
Name: BOYLE, JANET
Address: 1601 EAST LAKE DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33316

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN J. BOYLE MGR 07/06/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date