2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L06000032243

1. Entity Name TIVOLI SPRINGS LLC



Principal Place of Business

215 NORTH FEDERAL HIGHWAY, SUITE 1 BOCA RATON. FL 33432 Mailing Address

215 NORTH FEDERAL HIGHWAY, SUITE 1 BOCA RATON, FL 33432

FILED

08 MAR 21 PM 12: 06

TALLAHASSEE, FLORIDA



03052008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
20-4717958	ſ	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

LAZAR, JASON M 215 NORTH FEDERAL HIGHWAY, SUITE 1 BOCA RATON, FL 33432

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	named entity submits this statement for the purpose of cha- tions of registered agent.	nging its registered office or registered agent, or both, in the St	ate of Florida. I am familiar with, and accept	
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 \$138.75 After May 1, 2008 Fee will be \$538.75 9. MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BATMASIAN, JAMES 215 NORTH FEDERAL HIGHWAY, SUITE 1 BOCA RATON, FL 33432	7001	20969817	
TITLE NAME STREET ADDRESS	MGRM BATMASIAN, MARTA 215 NORTH FEDERAL HIGHWAY, SUITE 1	03/24/08	01002003 **5456.25	

STREET ADDRESS 215 NORTH FEDERAL HIG CITY-ST-ZIP BOCA RATON, FL 33432

NAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this liling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 truttee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SCHING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

13/10-108

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Daytime Phone #