

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L99000001964

1. Entity Name  
TIVOLI LAKES CLUB INVESTORS, LLC



Principal Place of Business  
215 N FEDERAL HIGHWAY SUITE 1  
BOCA RATON, FL 33432

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

FILED  
08 MAR 21 AM 11:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



03052008 No Chg-LLC CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0909992

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

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

BATMASIAN, JAMES H  
215 N FEDERAL HIGHWAY SUITE 1  
BOCA RATON, FL 33432

**DO NOT WRITE  
IN THIS SPACE**

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 \$138.75  
After May 1, 2008 Fee will be \$538.75**

**9. MANAGING MEMBERS/MANAGERS**

TITLE MGRM  
NAME BATMASIAN, JAMES H  
STREET ADDRESS 215 N FEDERAL HIGHWAY SUITE 1  
CITY-ST-ZIP BOCA RATON, FL 33432

TITLE MGRM  
NAME BATMASIAN, MARTA  
STREET ADDRESS 215 N FEDERAL HIGHWAY SUITE 1  
CITY-ST-ZIP BOCA RATON, FL 33432

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**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

03/06/08

Date Daytime Phone #