2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2004
Secretary of State

DOCUMENT# N03000010272

Entity Name: TREVISO HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10619 WALTER HUNTER ROAD
LITHIA, FL 33547

New Principal Place of Business:

Current Mailing Address:

10619 WALTER HUNTER ROAD
LITHIA, FL 33547

New Mailing Address:

FEI Number: 65-1211998 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TILLMAN, THOMAS
10619 WALTER HUNTER ROAD
LITHIA, FL 33547

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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: TILLMAN, THOMAS M
Address: 10619 WALTER HUNTER ROAD
City-St-Zip: LITHIA, FL 33547

Title: D ( ) Delete
Name: ARENAS, ANTHONY S
Address: 1614 MAGDALENE MANOR DR.
City-St-Zip: TAMPA, FL 33613

Title: D ( ) Delete
Name: TILLMAN, PHYLLIS M
Address: 10619 WALTER HUNTER ROAD
City-St-Zip: LITHIA, FL 33547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: TILLMAN, THOMAS M
Address: 10619 WALTER HUNTER ROAD
City-St-Zip: LITHIA, FL 33547

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS M. TILLMAN PD 07/01/2004

Electronic Signature of Signing Officer or Director — Date