2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 11, 2008 8:00 am Secretary of State

DOCUMENT # N0400008250 1. Entity Name TRIANO CONDOMINIUM ASSOCIATION, INC.				0	2-11-2008	3 90048 014	****6	1.25	
Principal Place of Business LIGHTHOUSE PROPERTY MGMT 16 CHURCH ST OSPREY, FL 34229		Mailing Address LIGHTHOUSE PROPERTY MGMT 16 CHURCH ST OSPREY, FL 34229			HEH BEN BEN BE			 	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address				 			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01182008 Cr	ng-NP	CR2E037 (., , , , , ,		
City & State		City & State		4. FEI Number 51-049818	5		No	plied For t Applicable	
Zip	Country	Zip	Country	5. Certificate of Sta		□ Fee	.75 Addi Required		
<u> </u>	6. Name and Address of Current	Registered Agent	Nama	7. Name and Add	ress of New F	Registered Age	nt		
CIPRIANO, LINDA 1303 TRIANO CIR. #205 VENICE, FL 34292				Name Street Address (P.O. Box Number is Not Acceptable)					
			City	· · · · · · · · · · · · · · · · · · ·		FL	Zip Code)	
	named entity submits this statement for the stat	hadman	(No ch	range to Ro		ed Age	•	and accept	
·	Signature, typed or printed name of registered agen	and tilled applicable (NOTE:	Registered Agent signature i	required when rainstating)		DATE			
	Filling Fee is \$61.25 Due by May 1, 2008	9. Election Cam Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Flo	Make check parida Departme	ent of St	tate	
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12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I jurither certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as it made under eath, that I am an office roor direction 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 in Block 10 or Block 11 in changed, or on an attacomply with an address, with an other like empowered.

SIGNATURE