

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90051 029 ***150.00

DOCUMENT # P01000079416

1. Entity Name
TIVOLI HOMES OF SARASOTA, INC.



Principal Place of Business

**1741 MAIN ST.,
STE 201
SARASOTA, FL 34236**

Mailing Address

**1741 MAIN ST.,
STE 201
SARASOTA, FL 34236**

94022572



2. Principal Place of Business

**2127 Ringling Blvd
Suite, Apt. #, etc.
102**

3. Mailing Address

**2127 Ringling Blvd
Suite, Apt. #, etc.
102**

01302004

Chg-P

CR2E034 (10/03)

City & State
Sarasota FL

Zip
34237

Country

City & State
Sarasota FL

Zip
34237

Country

4. FEI Number

65-1150858

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**JOHNSON, GARY
1523 RIDGEWOOD LN.
SARASOTA, FL 34231**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **DP** ☐ Delete
NAME **JOHNSON, GARY**
STREET ADDRESS **1523 RIDGEWOOD LN.**
CITY-ST-ZIP **SARASOTA, FL 34231**

TITLE **DV** ☐ Delete
NAME **RIVOLTA, PIERO**
STREET ADDRESS **1741 MAIN ST., STE. 101**
CITY-ST-ZIP **SARASOTA, FL 34236**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **2127 Ringling Blvd**
CITY-ST-ZIP **Sarasota, FL 34237**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gary Johnson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/04
Date

941-954-0355
Daytime Phone #