

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000067003 (1)

1. Corporation Name

TIARA DEVELOPMENT CORPORATION



Principal Place of Business

1231 NORTH GULFSTREAM AVE.
SARASOTA FL 34236

Mailing Address

1231 NORTH GULFSTREAM AVE.
SARASOTA FL 34236

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
09/13/1994

3a. Date of Last Report
08/11/1995

4. FEI Number
65-0537146

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

SKALITZKY, ROBERT
1231 NORTH GULFSTREAM AVE.
SARASOTA FL 34236

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name and Title)

Signature of Registered Agent (Print Name and Title)

Date

12. OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE PD NAME SKALITZKY STREET ADDRESS 1212 BEN FRANKLIN DR CITY-ST-ZIP SARASOTA FL	1.1 TITLE ☐ Change ☐ Addition
2. TITLE VT NAME GRAHAM, JACK STREET ADDRESS 1231 N GULFSTREAM AVE CITY-ST-ZIP SARASOTA FL	2.1 TITLE ☐ Change ☐ Addition
3. TITLE S NAME GALLAGHER, HELEN STREET ADDRESS 4001 BENEVA RD CITY-ST-ZIP SARASOTA FL	3.1 TITLE ☐ Change ☐ Addition
4. TITLE ☐ DELETE	4.1 TITLE ☐ Change ☐ Addition
5. TITLE ☐ DELETE	5.1 TITLE ☐ Change ☐ Addition
6. TITLE ☐ DELETE	6.1 TITLE ☐ Change ☐ Addition
7. TITLE ☐ DELETE	7.1 TITLE ☐ Change ☐ Addition
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98. TITLE ☐ DELETE	98.1 TITLE ☐ Change ☐ Addition
99. TITLE ☐ DELETE	99.1 TITLE ☐ Change ☐ Addition
100. TITLE ☐ DELETE	100.1 TITLE ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT SKALITZKY, President

FEB 19, 1996 941/366-5000

Date

Daytime Phone #

CR2E034 (12/95)