2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15955

FILED Mar 16, 2009 Secretary of State

Entity Name: TIVOLI TRACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 7932 WILES ROAD CORAL SPRINGS, FL 33067 US **Current Mailing Address: New Mailing Address:** C/O BENCHMARK PROPERTY MANAGEMENT 7932 WILES ROAD CORAL SPRINGS, FL 33067 FEI Number: 59-2676943 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROBERT KAY & ASSOCIATES, PA C/O ROBERT KAY & ASSOCIATES 6261 NW 6TH WAY STE 103 FORT LAUDERDALE, FL 33309 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete KATZ, ROBERT JERINKSKY, EUGENE Name: Name: 655 TRACE CIRCLE 102 Address: 545 TRACE CIRCLE 106 Address: City-St-Zip: DEERFIELD BEACH, FL 33441 City-St-Zip: DEERFIELD BEACH, FL 33441 Title: () Delete Title: () Change () Addition Name: CLINE, MARYBELL Name: Address: 561 TIVOLI TRACE CIRCLE SUITE 103 Address: City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: Title: () Delete Title: (X) Change () Addition RANTA, ROBEA RANTA, ROBERT Name: Name: 545 TRACE CIRCLE #204 Address: Address: 545 TRACE CIRCLE #204 City-St-Zip: DEERFIELD BEACH, FL 33441 City-St-Zip: DEERFIELD BEACH, FL 33441 Title: () Delete Title: () Change () Addition Name: SOYER, ENIGIL Name: Address: 522 TRACE CIRCLE 203 Address: City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: Title: () Delete Title: () Change (X) Addition PALACIOS, JORGE Name: Name: 610 TRACE CIRCLE #104 Address: Address: City-St-Zip: City-St-Zip: DEERFIELD BEACH, FL 33441

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ROBERT RANTA Ρ 03/16/2009

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please add this person _ as a Director._ Doc.# & N15955

Benedetto De Cosmo