2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002549

FILED Jul 24, 2006 Secretary of State

Entity Name: TIVOLI LAKES OF PALM BEACH COUNTY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5350 W. ATLANTIC AVE. 5350 W. ATLANTIC AVE.

101 SUITE 101

DELRAY BCH, FL 33484 DELRAY BEACH, FL 33484

Current Mailing Address: New Mailing Address:

5350 W. ATLANTIC AVE. 5350 W. ATLANTIC AVE.

101 SUITE 101

DELRAY BCH, FL 33484 DELRAY BEACH, FL 33484

FEI Number: 20-0665718 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STEINBERG, ANDREW STEINBERG, ANDREW 5350 W. ATLANTIC AVE. 5350 W. ATLANTIC AVE.

101 SUITE 101

DELRAY BCH, FL 33484 US DELRAY BEACH, FL 33484 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: 07/24/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: PD (X) Change () Addition

Name: STEINBERG, ANDREW Name: STEINBERG, ANDREW

Address: 5350 W. ATLANTIC AVE., SUITE 101 Address: 5350 W. ATLANTIC AVE., SUITE 101

City-St-Zip: DELRAY BCH, FL 33484 City-St-Zip: DELRAY BEACH, FL 33484

Title: VTD () Delete Title: VTD (X) Change () Addition

Name: SWARTZ, RICHARD A Name: SWARTZ, RICHARD A

Address: 5350 W. ATLANTIC AVE., SUITE 101 Address: 5350 W. ATLANTIC AVE., SUITE 101
City-St-Zip: DELRAY BCH, FL 33484 City-St-Zip: DELRAY BEACH, FL 33484

Title: SD () Delete Title: SD (X) Change () Addition

Name: PACOCHA, STEPHEN F Name: PACOCHA, STEPHEN F
Address: 5350 W. ATLANTIC AVE., SUITE 101 Address: 5350 W. ATLANTIC AVE., SUITE 101

City-St-Zip: DELRAY BCH, FL 33484 City-St-Zip: DELRAY BEACH, FL 33484

I hereby certify that the information supplied with this filing does not qualify for the 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: STEPHEN F PACOCHA S 07/24/2006