

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000002549

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

**FILED**  
**Apr 05, 2019**  
**Secretary of State**  
**0957441039CC**

**Current Principal Place of Business:**

10135 TIVOLI LAKES BLVD  
BOYNTON BEACH, FL 33437

**Current Mailing Address:**

10135 TIVOLI LAKES BLVD  
BOYNTON BEACH, FL 33437 US

**FEI Number: 20-0665718**

**Certificate of Status Desired: No**

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

SACHS SAX & CAPLAN  
6111 BROKEN SOUND PARKWAY NW, SUITE200  
BOCA RATON, FL 33487 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: LOUIS CAPLAN**

**04/05/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           PESCHANSKY, MARK  
Address        6944 CAVIRO LANE  
City-State-Zip: BOYNTON BEACH FL 33437

Title           3VP  
Name           STILLMAN, ANDREA  
Address        6863 ADRIANO DRIVE  
City-State-Zip: BOYNTON BEACH FL 33437

Title           PRESIDENT  
Name           EISENBERG, BOB  
Address        7048 ANTINORI LANE  
City-State-Zip: BOYNTON BEACH FL 33437

Title           2VP  
Name           BERKOWITZ, NORM  
Address        10437 TIVOLI LAKES  
City-State-Zip: BOYTON BEACH FL 33437

Title           1VP  
Name           WEINSTEIN, BEN  
Address        6916 ANTINORI LANE  
City-State-Zip: BOYNTON BEACH FL 33437

Title           SECRETARY  
Name           WEINBERG, STEVE  
Address        10063 NOCETO WAY  
City-State-Zip: BOYNTON BEACH FL 33437

*I hereby 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 all other like empowered.*

**SIGNATURE: EISENBERG , BOB**

**PRESIDENT**

**04/05/2019**

Electronic Signature of Signing Officer/Director Detail

Date