

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000002549

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

04/14/2023

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	SMITH, SHARON
Address	6884 ADRIANO DRIVE
City-State-Zip:	BOYNTON BEACH FL 33437

Title	PRESIDENT
Name	MYERS, DONALD
Address	6855 CAVIRO LANE
City-State-Zip:	BOYNTON BEACH FL 33437

Title	2VP
Name	RUDO , JAY
Address	6956 CAVIRO LANE
City-State-Zip:	BOYTON BEACH FL 33437

Title	1VP
Name	HALE , GERALD
Address	6904 ANTINORI LANE
City-State-Zip:	BOYNTON BEACH FL 33437

Title	SECRETARY
Name	SCHUTZMAN, HOWARD
Address	10461 TIVOLI LAKES BLVD
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:** DONALD MYERS**PRESIDENT**

04/14/2023

Electronic Signature of Signing Officer/Director Detail

Date