

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15955

**Entity Name:** TIVOLI TRACE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**890 TRACE CIRCLE  
DEERFIELD BEACH, FL 33441**Current Mailing Address:**C/O BENCHMARK PROPERTY MANAGEMENT  
7932 WILES ROAD  
CORAL SPRINGS, FL 33067 US**FEI Number:** 59-2676943**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GLAZER & ASSOCIATES, PA  
3113 STIRLING ROAD  
201  
HOLLYWOOD, FL 33312 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

**Officer/Director Detail :**

Title	T
Name	JEAN PIERRE, KAREN
Address	522 TRACE CIRCLE #210
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	S
Name	DINKOWITZ, HARRIET
Address	655 TRACE CIRCLE #104
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	VP
Name	NOTO, DINA G
Address	588 TIVOLI CIRCLE #207
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	P
Name	RANTA, ROBERT
Address	545 TRACE CIRCLE #204
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	D
Name	FASO, MARY LOU
Address	522 TRACE CIRCLE #107
City-State-Zip:	DEERFIELD BEACH FL 33441

Title	D
Name	TORRES, KAROLINA
Address	7932 WILES ROAD
City-State-Zip:	CORAL SPRINGS FL 33067

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:** HARRIET DINKOWITZ

S

04/01/2015

Electronic Signature of Signing Officer/Director Detail

Date