

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000557

FILED  
Apr 30, 2006  
Secretary of State

Entity Name: TIVOLI BY THE SEA (III) CONDOMINIUM OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

215 GRAND BLVD  
SUITE 200  
MIRAMAR BEACH, FL 32550 US

**New Principal Place of Business:**

**Current Mailing Address:**

215 GRAND BLVD  
SUITE 200  
MIRAMAR BEACH, FL 32550 US

**New Mailing Address:**

FEI Number: 59-2653298      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GORMLEY, TERRY P  
215 GRAND BLVD  
SUITE 200  
MIRAMAR BEACH, FL 32550 US

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

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:**

Title: DST ( ) Delete  
Name: STODDARD, BOBBY  
Address: 1803 PINENEEDLE RD  
City-St-Zip: MONTGOMERY, AL 36106 US

Title: DV ( ) Delete  
Name: HOWERTON, LONNIE  
Address: 2114 INDIAN CHUTE  
City-St-Zip: LOUISVILLE, KY 40207 US

Title: DP ( ) Delete  
Name: LUCAS, STEVE  
Address: 8821 OTTER COVE CIR  
City-St-Zip: INDIANAPOLIS, IN 46236 US

Title: D ( ) Delete  
Name: MCIVOR, DAN  
Address: 2661 RICH POND RD  
City-St-Zip: BOWLING GREEN, KY 42104 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: HOGAN, BEN  
Address: 2017 MORRIS AVE  
City-St-Zip: BIRMINGHAM, AL 35203 US

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: BOBBY STODDARD

DST

04/30/2006

Electronic Signature of Signing Officer or Director

Date