

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 232957

FILED
Feb 08, 2010
Secretary of State

Entity Name: TIFFANY APTS., INC.

Current Principal Place of Business:

1504 S SURF ROAD
HOLLYWOOD, FL 33019

New Principal Place of Business:

Current Mailing Address:

1504 S SURF ROAD
HOLLYWOOD, FL 33019

New Mailing Address:

FEI Number: 59-0934571 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNOLLY, MICHAEL P
1504 S. SURF RD., #67
HOLLYWOOD, FL 33019 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: CONNOLLY, MICHAEL P
Address: 1504 S. SURF RD.
City-St-Zip: HOLLYWOOD, FL 33019

Title: S
Name: REED, WAYNE
Address: 1504 S SURF ROAD
City-St-Zip: HOLLYWOOD, FL 33019

Title: D
Name: WOLLEON, JOE
Address: 1504 S. SURF RD.
City-St-Zip: HOLLYWOOD, FL 33019

Title: D
Name: CREPEAU, DONALD
Address: 1504 S. SURF RD.
City-St-Zip: HOLLYWOOD, FL 33019

Title: T
Name: JOHNSTONE, ALAN
Address: 1504 S. SURF RD.
City-St-Zip: HOLLYWOOD, FL 33019

Title: D
Name: PICCIRILLI, ANTHONY
Address: 1504 S. SURF RD.
City-St-Zip: HOLLYWOOD, FL 33019

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL CONNOLLY

PRES

02/08/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date