

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 09, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # 745068	
1. Entity Name TIFFANY PLACE CONDOMINIUM ASSOCIATION, INC.	
Principal Place of Business 7000 GULF DR. HOLMES BCH., FL 34217	Mailing Address 7000 GULF DR. HOLMES BCH., FL 34217



01132005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-1972651	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RICHARD WEBER & ASSOC.  
 738 10TH ST. WEST  
 PALMETTO, FL 34221

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of, the registered agent.

SIGNATURE: [Signature] (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	03/09/05-80038-025 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS REID, ROBERT 228 CHRISTIE KNOLL POINT S.W. CALGARY, ALBERTA, CA 73HR9
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LUCY, MICHAEL 331 HILLTOP DR. WENHAM, MA 01984
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MOPHERSON, ROBERT 1830 TAYLOR AVE. WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCKENDRY, RICHARD 35 OAKMONT COURT EAST AMHERST, NY 14051
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT FORD, WILLIAM 570 CRESCENT BLVD., #505 GLEN ELLYN, IL 60137
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] William Ford  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: 2/15/05 Daytime Phone #: 941-778-1970