

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N40572

1. Entity Name

TIFFANY SQUARE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 20, 2000 8:00 am**  
**Secretary of State**

04-20-2000 90103 016 \*\*\*\*61.25

Principal Place of Business

Mailing Address

1901 S. TAMiami TRAIL  
VENICE FL 34293

1901 S. TAMiami TRAIL  
VENICE FL 34293-5002

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0225239

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MACRIS, STEVEN W.  
609 S. TAMiami TRAIL  
VENICE FL 34285

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME CLOUTIER, JACQUES  
STREET ADDRESS 1901 S. TAMiami TRAIL  
CITY-ST-ZIP VENICE FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ST ☐ Delete  
NAME CLOUTIER, JACQUES  
STREET ADDRESS 1901 S. TAMiami TRAIL  
CITY-ST-ZIP VENICE FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME MACRIS, STEVEN W.  
STREET ADDRESS 609 S. TAMiami TRAIL  
CITY-ST-ZIP VENICE FL

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 227 PENSACOLA AVE  
CITY-ST-ZIP VENICE, FL 34285

TITLE D ☒ Delete  
NAME ROLPH, DENISE A.  
STREET ADDRESS 609 S. TAMiami TRAIL  
CITY-ST-ZIP VENICE FL

TITLE ☐ Change ☒ Addition  
NAME DONALD W. ROBERTSON  
STREET ADDRESS 2828 S. MCALL RD, SUITE 21  
CITY-ST-ZIP ENGLEWOOD, FL 34224

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4.14.00

CR2E037 (9/99)