


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2007 8:00 am
Secretary of State

04-12-2007 90023 010 ****61.25

DOCUMENT # N92000000078

1. Entity Name
 TIFFANY BY THE SEA HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
 920 THIRD STREET
 SUITE B
 NEPTUNE BEACH, FL 32233 US

Mailing Address
 920 THIRD STREET
 SUITE B
 NEPTUNE BEACH, FL 32233 US

40057591



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

03272007 Chg-NP CR2E037 (12/06)

City & State
 Zip Country

4. FEI Number
 59-3162148

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WALLACE, DENISE L
 920 THIRD STREET
 SUITE B
 NEPTUNE BEACH, FL 32266

7. Name and Address of New Registered Agent

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

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD Delete
 NAME ALFARO, JIM
 STREET ADDRESS 98 KIMBERLY COURT
 CITY-ST-ZIP ATLANTIC BEACH, FL 32233

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D Delete
 NAME FORTUNE, SCOTT THOMAS
 STREET ADDRESS 84 NICOLE LANE
 CITY-ST-ZIP ATLANTIC BEACH, FL 32233

TITLE D Change Addition
 NAME Willis, John
 STREET ADDRESS 89 Nicole Lane
 CITY-ST-ZIP Atlantic Beach, FL 32233

TITLE D Delete
 NAME DUTTERA, BRAD
 STREET ADDRESS 2211 ALICIA LANE
 CITY-ST-ZIP ATLANTIC BEACH, FL 32233

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D Delete
 NAME WHITTEN, TODD
 STREET ADDRESS 82 NICOLE LANE
 CITY-ST-ZIP ATLANTIC BEACH, FL 32233

TITLE D Change Addition
 NAME Perlmuter, Neil
 STREET ADDRESS 88 Nichole Lane
 CITY-ST-ZIP Atlantic Beach, FL 32233

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 exemptions contained 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 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: Jim Alfaro **JIM ALFARO** **PRESIDENT** 3/29/07 904246-7878

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #