

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 754987

**FILED**  
**Jan 23, 2013**  
**Secretary of State**  
**CC3899604097**

**Entity Name:** TIFFANY OF BAL HARBOUR CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

10175 COLLINS AVENUE  
BAL HARBOUR, FL 33154

**Current Mailing Address:**

10175 COLLINS AVENUE  
BAL HARBOUR, FL 33154

**FEI Number: 59-2279576**

**Certificate of Status Desired: Yes**

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

MARTINEZ, CARIDAD PTY MGR  
10175 COLLINS AVE  
BAL HARBOUR, FL 33154 US

*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

**Officer/Director Detail :**

Title            PRES  
Name            MAURICE, CORNELISSEN  
Address        10175 COLLINS AVE # 1606  
City-State-Zip: BAL HARBOUR FL 33154

Title            V-P  
Name            FILIPPAZZO, CHARLES  
Address        10175 COLLINS AVE # 601  
City-State-Zip: BAL HARBOUR FL 33154

Title            SEC  
Name            FRAYND, PAUL  
Address        10175 COLLINS AVENUE #704  
City-State-Zip: BAL HARBOUR FL 33154

Title            TREA  
Name            WEINSTEIN, KATHLEEN  
Address        10175 COLLINS AVE 304  
City-State-Zip: MIAMI BEACH FL 33154

Title            D  
Name            LEE, NATHAN  
Address        10175 COLLINS AVE 302  
City-State-Zip: MIAMI BEACH FL 33154

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

**SIGNATURE: MAURICE CORNELISSEN**

**PRESIDENT**

**01/23/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date