

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

DOCUMENT# N06000007548

**Entity Name:** THE TIFFANY CENTRE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Sep 19, 2013**  
**Secretary of State**  
**CC9099629285**

**Current Principal Place of Business:**

2583 S. VOLUSIA AVENUE  
SUITE 100  
ORANGE CITY, FL 32763

**Current Mailing Address:**

2583 S. VOLUSIA AVENUE  
SUITE 100  
ORANGE CITY, FL 32763

**FEI Number: 20-5304974**

**Certificate of Status Desired: Yes**

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

ACCARDI, J. ROGER  
2583 S. VOLUSIA AVENUE  
SUITE 100  
ORANGE CITY, FL 32763 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 D  
Name SENEZ, BERNARD ESR.  
Address 755 EASTRIDGE DRIVE  
City-State-Zip: ORANGE CITY FL 32763

Title D  
Name SENEZ, KATHLEEN MSR.  
Address 755 EASTRIDGE DRIVE  
City-State-Zip: ORANGE CITY FL 32763

Title D  
Name ACCARDI, J. ROGER  
Address 449 HIGHTOWER DRIVE  
City-State-Zip: DEBARY FL 32713

*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: J. ROGER ACCARDI**

**DIRECTOR**

**09/19/2013**

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

\_\_\_\_\_  
Date