

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40572

Entity Name: TIFFANY SQUARE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O VESTA PROPERTY SERVICES
514 N. INDIANA AVE.
ENGLEWOOD, FL 34223

FILED
Apr 17, 2020
Secretary of State
0254307340CC

Current Mailing Address:

C/O VESTA PROPERTY SERVICES
125 SW 3RD PL #207
CAPE CORAL, FL 34223 US

FEI Number: 65-0225239

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VESTA PROPERTY SERVICES
125 SW 3RD PLACE
STE #207
CAPE CORAL, FL 33991 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: BRANDY DAVENPORT

04/17/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name YOUNG, LESA
Address C/O VESTA PROPERTY SERVICES
 514 N. INDIANA AVE.
City-State-Zip: ENGLEWOOD FL 34223

Title VP
Name MITCHELL, CHRISTY
Address C/O VESTA PROPERTY SERVICES
 514 N. INDIANA AVE.
City-State-Zip: ENGLEWOOD FL 34223

Title PRESIDENT
Name HARTMAN, PATRICIA
Address C/O VESTA PROPERTY SERVICES
 514 N. INDIAN AVE.
City-State-Zip: ENGLEWOOD FL 34223

Title D
Name FREY, BONNIE
Address C/O VESTA PROPERTY SERVICES
 514 N. INDIANA AVE.
City-State-Zip: ENGLEWOOD FL 34223

Title SECRETARY
Name CERCE, MICHAEL
Address C/O VESTA PROPERTY SERVICES
 514 N. INDIAN AVE.
City-State-Zip: ENGLEWOOD FL 34223

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: PATRICIA HARTMAN

PRESIDENT

04/17/2020

Electronic Signature of Signing Officer/Director Detail

Date