2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# 710549

Entity Name: TIFFANY GARDENS EAST, INC.

Current Principal Place of Business:

INTEGRITY PROP MGT., INC.
953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

Current Mailing Address:

INTEGRITY PROP MGT., INC.
P.O. BOX 8726
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 59-1307712 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WHITTLE, CYNTHIA G
C/O INTEGRITY PROPERTY MANAGEMENT
953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ZUCCARO, ALBERT
Address: 1600 NO OCEAN BLVD APT 505
City-St-Zip: POMPANO BEACH, FL 33062

Title: VP ( ) Delete
Name: SUCKNESS, HARVEY
Address: 1610 N OCEAN BLVD
City-St-Zip: POMPANO BEACH, FL 33062

Title: SD ( ) Delete
Name: SATCHELL, MARK
Address: 1610 N OCEAN BLVD #703
City-St-Zip: POMPONO BEACH, FL

Title: T ( ) Delete
Name: FRACASSA, ARNOLD
Address: 1610 N OCEAN BLVD
City-St-Zip: POMPANO BEACH, FL 33062

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PENTLAND, GRAEME
Address: 1610 N OCEAN BLVD #502
City-St-Zip: POMPANO BEACH, FL 33062

Title: VPD (X) Change ( ) Addition
Name: STEIMLE, DAVID
Address: 1610 N OCEAN BLVD #801/1204/1003
City-St-Zip: POMPANO BEACH, FL 33062

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change ( ) Addition
Name: WILSON, RON
Address: 1610 N OCEAN BLVD #604
City-St-Zip: POMPANO BEACH, FL 33062

Title: PD ( ) Change (X) Addition
Name: ZUCCARO, AL
Address: 1610 N OCEAN BLVD #505
City-St-Zip: POMPANO BEACH, FL 33062

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: AL ZUCCARO PD 04/16/2009
Electronic Signature of Signing Officer or Director Date