

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711044

FILED
Apr 16, 2009
Secretary of State

Entity Name: TIFFANY GARDENS NORTH, INC.

Current Principal Place of Business:

953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 59-1312246 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 PRO MANG
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: TD () Delete
Name: ZEMPOL, BRONI
Address: 1620 N OCEAN BLVD #508
City-St-Zip: POMPANO BEACH, FL 33062

Title: P () Delete
Name: LANGENDERFER, RUSSELL
Address: 1620 N OCEAN BLVD, #510
City-St-Zip: POMPANO BEACH, FL

Title: SD () Delete
Name: HANSEN, ELAINE
Address: 1620 N OCEAN BLVD #507
City-St-Zip: POMPANO BEACH, FL 33062

Title: VD () Delete
Name: CATALANO, ROMOLLO
Address: 1620 N OCEAN BLVD #608
City-St-Zip: POMPANO BEACH, FL 33062

Title: D () Delete
Name: STEVENS, NOEL
Address: 1620 N OCEAN BLVD #315
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: LEES, ROY
Address: 1620 N OCEAN BLVD #909
City-St-Zip: POMPANO BEACH, FL 33062

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

Title: SD (X) Change () Addition
Name: CATALANO, ROMOLO
Address: 1620 N OCEAN BLVD #608
City-St-Zip: POMPANO BEACH, FL 33062

Title: VPD (X) Change () Addition
Name: STEVENS, NOEL
Address: 1620 N OCEAN BLVD #315
City-St-Zip: POMPANO BEACH, FL 33062

Title: D (X) Change () Addition
Name: CERULLI, PAT
Address: 1620 N OCEAN BLVD #310
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: RUSS LANGENDERFER

PD

04/16/2009

Electronic Signature of Signing Officer or Director

Date