# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 03, 2012**
**Secretary of State**

DOCUMENT# N20177

**Entity Name:** TIFFANY TRACE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CREST MANAGEMENT GROUP INC.
6413 CONGRESS AVE., STE 200
BOCA RATON, FL 33487 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CREST MANAGEMENT GROUP INC.
6413 CONGRESS AVE., STE 200
BOCA RATON, FL 33487 US

**New Mailing Address:**

**FEI Number: 65-0171459** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CREST MANAGEMENT GROUP, INC.
6413 CONGRESS AVENUE, SUITE 200
BOCA RATOB, FL 33487 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: P
Name: MORIN, JOHN
Address: 17427 TIFFANY TRACE DRIVE
City-St-Zip: BOCA RATON, FL 33487

Title: SD
Name: SCHNEIDER, STEPHEN
Address: 17587 TIFFANY TRACE DR
City-St-Zip: BOCA RATON, FL 33487

Title: VP
Name: FLINT, BENJAMIN
Address: 17467 TIFFANY TRACE DRIVE
City-St-Zip: BOCA RATON, FL 33487

Title: TD
Name: POWELL, HENRY
Address: 17555 TIFFANY TRACE DR
City-St-Zip: BOCA RATON, FL 33487

Title: D
Name: TRINCHETTO, ROBERT
Address: 17459 TIFFANY TRACE DR
City-St-Zip: BOCA RATON, FL 33487

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: JOHN MORIN P 02/03/2012

Electronic Signature of Signing Officer or Director Date