

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 733676

**Entity Name:** TIFFANY PLAZA CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 12, 2015**  
**Secretary of State**  
**CC0568164653**

**Current Principal Place of Business:**

4325 GULF OF MEXICO DR  
OFFICE # 104  
LONGBOAT KEY, FL 34228

**Current Mailing Address:**

4325 GULF OF MEXICO DR  
OFFICE # 104  
LONGBOAT KEY, FL 34228

**FEI Number: 59-1743785**

**Certificate of Status Desired: No**

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

RUTZ, ROGER  
4325 GULF OF MEXICO DR  
UNIT # 506  
LONGBOAT KEY, FL 34228 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 O  
Name WILLIAMS, DOROTHY P  
Address 4325 GULF OF MEXICO DR #306  
City-State-Zip: LONGBOAT KEY FL 34228

Title O  
Name MULLIHAN, MICHAEL  
Address 4325 GULF OF MEXICO DR UNIT #508  
City-State-Zip: LONGBOAT KEY FL 34228

Title D  
Name JIOIA, SHARON  
Address 4325 GULF OF MEXICO DR #407  
City-State-Zip: LONGBOAT KEY FL 34228

Title D  
Name HUMPERT, BILL  
Address 2441 FELICE DR  
City-State-Zip: VILLA HILLS KY 41017

Title O  
Name RUTZ, ROGER  
Address 4325 GULF OF MEXICO DR. #506  
City-State-Zip: LONGBOAT KEY FL 34228

Title O  
Name O'KULICH, NICHOLAS  
Address 4325 GULF OF MEXICO DR UNIT #503  
City-State-Zip: LONGBOAT KEY FL 34228

*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: DOROTHY WILLIAMS**

**PRESIDENT**

**03/12/2015**

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

\_\_\_\_\_  
Date