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: AILYN DEJESUS

Electronic Signature of Signing Officer/Director Detail

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9300000510

Entity Name: TIFFANY COVE RECREATION ASSOCIATION, INC.

Current Principal Place of Business:

C/O PINES PROPERTY MGMT 6941 SW 196 AVE, SUITE 27 PEMBROKE PINES, FL 33332

Current Mailing Address:

C/O PINES PROPERTY MGT. P.O. BOX 820100 SOUTH FLORIDA, FL 33082-0100 US

FEI Number: 65-0441687

Name and Address of Current Registered Agent:

STEVENS & GOLDWYN, P.A. 2 SOUTH UNIVERSITY DR. # 329 PLANTATION, FL 33324 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

Officer/Director Detail :

	Title	Ρ	Title	VP
	Name	DEJESUS, AILYN	Name	GUZMAN, CARLOS
	Address	C/O PINES PROPERTY MGMT 6941 SW 196 AVE, SUITE 27	Address	C/O PINES PROPERTY MGMT 6941 SW 196 AVE, SUITE 27
	City-State-Zip:	PEMBROKE PINES FL 33332	City-State-Zip:	PEMBROKE PINES FL 33332
	Title	D	Title	т
	Title Name	D PHIPPS, CALVO	Title Name	T DE LA NOVAL, ALICIA
				T DE LA NOVAL, ALICIA C/O PINES PROPERTY MGMT 6941 SW 196 AVE, SUITE 27
	Name	PHIPPS, CALVO C/O PINES PROPERTY MGMT	Name	C/O PINES PROPERTY MGMT

Certificate of Status Desired: No

Date

03/22/2022 Date

PRESIDENT

FILED Mar 22, 2022 Secretary of State 8486426084CC