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Feb 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000004660 (6)
1. Corporation Name
TUSCA OAKS HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 555 WINDERLEY PLACE SUITE 420 MAITLAND FL 32751 US	Mailing Address 555 WINDERLEY PLACE SUITE 420 MAITLAND FL 32751-7466 US
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3. Date Incorporated or Qualified 09/16/1994	3a. Date of Last Report 03/15/1996
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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4. FEI Number 59-3289675	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**MOHLE, HELMUT
555 WINDERLEY PLACE
SUITE 420
MAITLAND FL 32751**

10. Name and Address of New Registered Agent
81 Name **Gilbert, John W.**
82 Street Address (P.O. Box Number is Not Acceptable)
555 Winderley Place, Ste. 420
83
84 City **Maitland** **FL** 85 Zip Code **32751**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.
SIGNATURE *John W. Gilbert* **John W. Gilbert** DATE **2/4/97**

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	MOHLE, HELMUT L.	
STREET ADDRESS	555 WINDERLEY PLACE SUITE 420	
CITY-ST-ZIP	MAITLAND FL	
TITLE	DST	<input type="checkbox"/> DELETE
NAME	GEORGE, CHERYL A	
STREET ADDRESS	555 WINDERLEY PL STE 420	
CITY-ST-ZIP	MAITLAND FL	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	KOELBLE, JANICE C.	
STREET ADDRESS	555 WINDERLEY PLACE SUITE 420	
CITY-ST-ZIP	MAITLAND FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Gilbert, John	
1.3 STREET ADDRESS	555 Winderley Place Ste. 420	
1.4 CITY-ST-ZIP	Maitland, Fl. 32751	
2.1 TITLE	DST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Smith, Wade	
2.3 STREET ADDRESS	555 Winderley Place Ste. 420	
2.4 CITY-ST-ZIP	Maitland, Fl. 32751	
3.1 TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Parker, Jennifer	
3.3 STREET ADDRESS	555 Winderley Place Ste. 420	
3.4 CITY-ST-ZIP	Maitland, Fl. 32751	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.
Jennifer Parker **2/3/97**

CFR2E037 (9/96)