2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N02000006676



FILED Mar 17, 2004 08:00 AM Secretary of State

1. Entity Nam TUSCAN		RVE COMMUNITY	'ASSOC	CIATION, INC	-							
Principal Plac 24301 WALE BONITA SPRI	EN CENTER	DR STE 300	2430	Acdress 1 WALDEN CENTE (A SPRINGS, FL 3		TE 300						
2. Principal Place of Business 3.			3. Maili	3. Mailing Address								
Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.				02152004	Chg-NP	CF	12E037 (10/03)	
City & State			Cin	City & State				72-1534395 Not Appli			Applied For Not Applicable	
Zip	Country			<u> </u>		untry			of Status Desir		Fee Haquii	
	6. Name	and Address of Current	Registere	i Agent		Name		7. Name and	Address of N	ew Regist	ered Agent	
HASTINGS 24301 WA BONITA S	LDEN CE	NTER DR STE 300					ddress (I	P.O. Box Numb	er is Not Accep	table)		
						City		 ; ;	<u></u>		FL Zip Co	de
	named entiti ions of regist	y submits this statement li tered agent.	or the purpo	se of changing its	register	ed office or	register	ed agent, or bo	th, in the State	of Florida.	l am familiar wit	and accept
SIGNATURE.	Signature, typed	for printed name of registered agen	t and tide If appli	caple. (NOT	Registere	d Agent signatu	uca cacuinad		<u> </u>	<u> </u>	DATE	
								Authoring some (Riskly)				
	-	re is \$61.25 flay 1, 2004	-	9. Election Can Trust Fund C		inancing		\$5.00 May E Added to Fees		Make o	theck payable department of	
19.	-	•	Transcription of the spin con-	9. Election Can		inancing		\$5.00 May E Added to Fees		Make o	check payable	State N 10
TITLE	Due by N	Aay 1, 2004 OFFICERS AND D	Transcription of the spin con-	9. Election Can	11.	inancing ion.		\$5.00 May E Added to Fees		Make o	theck payable department of the	State N 10
	PD HESSEL, 24301 W/	fay 1, 2004	RECTORS	9. Election Can Trust Fund C	11. TITU NAM STRE	inancing ion.		\$5.00 May E Added to Fees	ANGES TO OF	Make of Florida B	check payable repartment of some DIRECTORS	State IN 10 Addition
THTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD HESSEL, 24301 WA BONITAS	OFFICERS AND D OFFICERS AND D MICHAEL ALDEN CENTER DRIV SPRINGS, FL 34134	RECTORS	9. Election Can Trust Fund C	THE	E E ADDRESS -S1-28P		\$5.00 May E Added to Fees	ANGES TO OF	Make of Florida B	check payable repartment of some Change	State IN 10 Addition
ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD HESSEL, 24301 W/BONITA S	OFFICERS AND D OFFICERS AND D MICHAEL ALDEN CENTER DRIV SPRINGS, FL 34134 YLVIA	RECTORS	9. Election Can Trust Fund C	11. TITL NAM STRE CHY THE	E E ADDRESS -S1-28P		\$5.00 May E Added to Fees	ANGES TO OF	Make of Florida B	check payable pepartment of the DIRECTORS Change 1011	State IN 10 Addition
THTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD HESSEL, 24301 W/ BONITA S STD KEITH, S' 2020 CLU	OFFICERS AND D OFFICERS AND D MICHAEL ALDEN CENTER DRIV SPRINGS, FL 34134	RECTORS	9. Election Can Trust Fund C	11. TIFL NAM STRE CITY TOTAL NAM STRE	E E E E E E E E E E E E E E E E E E E		\$5.00 May E Added to Fees	ANGES TO OF	Make of Florida B	check payable pepartment of the DIRECTORS Change 1011	State IN 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD HESSEL, 24301 W/B BONITA STD KEITH, S' 2020 CLU SUN CITY	OFFICERS AND D MICHAEL ALDEN CENTER DRIV SPRINGS, FL 34134 YLVIA IBHOUSE DR Y CENTER, FL 33573	RECTORS	9. Election Can Trust Fund C	TITLE NAME STREE CITY TOTAL MAM STREE CITY TOTAL MAM STREE CITY TITLE TI	E E E E ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E		\$5.00 May E Added to Fees	ANGES TO OF	Make of Florida B	check payable pepartment of the DIRECTORS Change 1011	State IN 10 Addition
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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

Date

Date