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.

PRESIDENT

SIGNATURE: ROBERT ELLIS

SERVICES P O BOX 152930 City-State-Zip: CAPE CORAL FL 33915

Electronic Signature of Signing Officer/Director Detail

Entity Name: TUSCANY COURT CONDOMINIUM ASSOCIATION, INC.

Current Mailing Address:

3800 AGUALINDA BLVD. CAPE CORAL, FL 33914

DOCUMENT# N05000005465

C/O COASTAL ASSOCIATION SERVICES P O BOX 152930 CAPE CORAL, FL 33915 US

Current Principal Place of Business:

FEI Number: 90-0292182

Name and Address of Current Registered Agent:

COASTAL ASSOCIATION SERVICES, LLC C/O COASTAL ASSOCIATION SERVICES P O BOX 152930 CAPE CORAL, FL 33915 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: TROY FUTCH				04/18/2019
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	PRESIDENT	Title	SECRETARY, TREASURER	
Name	ELLIS, ROBERT	Name	LOHR, GARY	
Address	C/O COASTAL ASSOCIATION SERVICES P O BOX 152930	Address	C/O COASTAL ASSOCIATION SERVICES P O BOX 152930	
City-State-Zip:	CAPE CORAL FL 33915	City-State-Zip:	CAPE CORAL FL 33915	
Title	DIRECTOR	Title	DIRECTOR	
Name	ALWIN, DAVID	Name	HENGEL, CANDANCE	
Address	C/O COASTAL ASSOCIATION SERVICES P O BOX 152930	Address	C/O COASTAL ASSOCIATION SERVICES P O BOX 152930	
City-State-Zip:	CAPE CORAL FL 33915	City-State-Zip:	CAPE CORAL FL 33915	
Title	DIRECTOR			
Name	ROSHON, SUZANNE			
Address	C/O COASTAL ASSOCIATION			

Certificate of Status Desired: No

8962467467CC

04/18/2019

Date