

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000005465

**Entity Name:** TUSCANY COURT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3800 AGUALINDA BLVD.  
CAPE CORAL, FL 33914

**FILED**  
**Apr 08, 2020**  
**Secretary of State**  
**5505110792CC**

**Current Mailing Address:**

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

**FEI Number: 90-0292182**

**Certificate of Status Desired: No**

**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**

**04/08/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           ELLIS, ROBERT  
Address        C/O COASTAL ASSOCIATION  
                  SERVICES  
                  P O BOX 152930  
City-State-Zip: CAPE CORAL FL 33915

Title           TREASURER  
Name           LOHR, GARY  
Address        C/O COASTAL ASSOCIATION  
                  SERVICES  
                  P O BOX 152930  
City-State-Zip: CAPE CORAL FL 33915

Title           PRESIDENT  
Name           ALWIN, DAVID  
Address        C/O COASTAL ASSOCIATION  
                  SERVICES  
                  P O BOX 152930  
City-State-Zip: CAPE CORAL FL 33915

Title           VP  
Name           SILVER, MICHAEL  
Address        C/O COASTAL ASSOCIATION  
                  SERVICES  
                  P O BOX 152930  
City-State-Zip: CAPE CORAL FL 33915

Title           SECRETARY  
Name           ROSHON, SUZANNE  
Address        C/O COASTAL ASSOCIATION  
                  SERVICES  
                  P O BOX 152930  
City-State-Zip: CAPE CORAL FL 33915

*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: MICHAEL SILVER**

**VP**

**04/08/2020**

Electronic Signature of Signing Officer/Director Detail

Date