

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

DOCUMENT# N99000000687

**Entity Name:** TUSCANY POINTE PHASE 2 HOMEOWNERS' ASSOCIATION, INC.

**FILED**  
**Jun 08, 2020**  
**Secretary of State**  
**7054689474CC**

**Current Principal Place of Business:**

686 N HUNT CLUB BLVD, STE 180  
LONGWOOD, FL 32779

**Current Mailing Address:**

686 N HUNT CLUB BLVD, STE 180  
LONGWOOD, FL 32779 US

**FEI Number:** 90-0171293

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LOCASCIO, MARYJO  
C/O SIGNATURE MANAGEMENT SOLUTIONS LLC  
686 N HUNT CLUB BLVD, STE 180  
LONGWOOD, FL 32779 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:** MARYJO LOCASCIO

06/08/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            DAVILA, JOSE  
Address        686 N HUNT CLUB BLVD, STE 180  
City-State-Zip: LONGWOOD FL 32779

Title            SECRETARY  
Name            FERNANDEZ, JORGE  
Address        686 N HUNT CLUB BLVD, STE 180  
City-State-Zip: LONGWOOD FL 32779

Title            TREASURER  
Name            WILLIAMS, BRIAN  
Address        686 N HUNT CLUB BLVD, STE 180  
City-State-Zip: LONGWOOD FL 32779

*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:** JOSE DAVILA

**PRESIDENT**

06/08/2020

Electronic Signature of Signing Officer/Director Detail

Date