2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State
03-31-2003 90195 036 ****61.25

DOCUMENT # 747882

1. Entity Name

COUNTRY CLUB VILLAGE AT TUSCAWILLA HOMEOWNERS AS SOCIATION, INC.

Principal Place of Business	Mailing Address
225 S WESTMONTE DR STE 2050 ALTAMONTE SPRINGS FL 32714 US	P O BOX 161606 ALTAMONTE SPRINGS FL 32716-1606 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2130020 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PFAUSER, MARGO 225 S WESTMONTE DR STE 2050 ALTAMONTE SPRINGS FL 32714	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CONTI, DONALD 1036 PEBBLE BEACH CIRCLE EAST WINTER SPRINGS FL 32708	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP James P. Fitts 904 Augusta National Blvd. Winter Springs, FL 32708 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SANDQUIST, DIANE 1390 AUGUSTER NATE BLVD WINTER SPRINGS FL 32708	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Joe Dysard 1354 Augusta National Blvd. Winter Springs, FL 32708 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD COLL, ROBERT 1048 PEBBLE BCH CIR W. WINTER SPRINGS FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Luis Gonzalez 1351 Augusta National Blvd. Winter Springs, FL 32708 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROSSI, JOHN 1022 PEBBLE BEACH CIRCLE EAST WINTER SPRINGS FL 32708	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Gene Lein 1173 Winged Foot Circle East Winter Springs, FL 32708 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHOLTZ, KENNETH 1142 WINGED FOOT CIRCLE WEST WINTER SPRINGS FL 32708	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Joe Yarusinski 1166 Winged Foot Circle East Winter Springs, FL 32708 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D REDMOND, LARRY 1037 PEBBLE BEACH CIRCLE EAST WINTER SPRINGS FL 32708	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

12. I 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 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: Robert B. Coll 3/26/03 (407)830-6773