


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 23, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L01000011715</b> 1. Entity Name TUSCANY RIDGE, LLC	
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Principal Place of Business 6000 METRO WEST BLVD STE 105 ORLANDO, FL 32835	Mailing Address 6000 METRO WEST BLVD STE 105 ORLANDO, FL 32835
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03292007No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3735321	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  TATICH, PHILIP 2933 W. SR 434, SUITE 131 341 N. MAITLAND AVE., SUITE 340 LONGWOOD, FL 32779
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<b>DO NOT WRITE IN THIS SPACE</b>
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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

**Filing Fee is \$50.00  
Due by May 1, 2007**

U00000723502  
05/02/07-80074-004 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KANTOR, JOSEPH 6000 METRO WEST BLVD ST 105 ORLANDO, FL 32835
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ZIV, MOSHE 6000 METRO WEST BLVD STE 105 ORLANDO, FL 32835
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #