

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Aug 20, 2007 8:00 am
Secretary of State

08-20-2007 90183 013 ****55.00

DOCUMENT # L03000045875			
1. Entity Name TUSCANY BAY HOMES, LLC			
Principal Place of Business 991 TOWN TERRACE JENSEN BEACH FL 34957		Mailing Address P.O. BOX 347 JENSEN BEACH FL 34958	
2. Principal Place of Business - No P.O. Box # 2025 River Ct		3. Mailing Address 2025 River Ct	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Jensen Beach		City & State Jensen Beach	
Zip 34957	Country USA	Zip 34957	Country USA
4. FEI Number 20-0449010		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent MIRANDA, MICHAEL 991 TOWN TERRACE JENSEN BEACH FL 34957		7. Name and Address of New Registered Agent Name Barry VanWagner Street Address (P.O. Box Number is Not Applicable) 2025 River Court City Jensen Beach FL Zip Code 34957	
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____			
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGRM MIRANDA CONSTRUCTION & DEVELOPMENT, INC. 991 TOWN TERRACE JENSEN BEACH FL 34957 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☒ Change ☐ Addition Miranda Construction - delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGRM BVW BUILDING COMPANY 2025 RIVER CT JENSEN BEACH FL 34957 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☒ Change ☐ Addition Resigned 12/31/06
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition President BVW Building Company, 2025 NE River Ct.
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition Jensen Bch. FL 34957 Barry VanWagner
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 IS TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date 7-12-07 Daytime Phone # 772 215 4002	