

# **2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000009674

**FILED**  
**Sep 10, 2007**  
**Secretary of State**

**Entity Name:** TUSCANY RIDGE LAND GROUP, LLC

**Current Principal Place of Business:**

692 W. MONTROSE STREET  
SUITE A  
CLERMONT, FL 34711 US

**New Principal Place of Business:**

**Current Mailing Address:**

692 W. MONTROSE STREET  
SUITE A  
CLERMONT, FL 34711 US

**New Mailing Address:**

**FEI Number:** 20-2339000

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAWSON, SANDRA H  
692 W. MONTROSE STREET  
SUITE A  
CLERMONT, FL 34711 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: LAWSON, SANDRA H  
Address: 692 W. MONTROSE STREET, SUITE A  
City-St-Zip: CLERMONT, FL 34711

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: PRESCOTT, BRIAN  
Address: 692 W. MONTROSE STREET, SUITE A  
City-St-Zip: CLERMONT, FL 34711

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: BRIAN PRESCOTT

MR.

09/10/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date