

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000009674

FILED  
Jan 22, 2008  
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:

P.O. BOX 121103  
CLERMONT, FL 34712 US

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: PRESCOTT, BRIAN  
Address: 692 W. MONTROSE STREET, SUITE A  
City-St-Zip: CLERMONT, FL 34711

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: PRESCOTT, BRIAN  
Address: P.O. BOX 121103  
City-St-Zip: CLERMONT, FL 34712

Title: MGR ( ) Change (X) Addition  
Name: LAWSON, SANDRA H  
Address: P.O. BOX 121103  
City-St-Zip: CLERMONT, FL 34712

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: SANDRA H. LAWSON

MGR

01/22/2008

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