

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000047141

FILED  
Jan 08, 2009  
Secretary of State

**Entity Name:** TUSCANY DEVELOPMENT GROUP, LLC

**Current Principal Place of Business:**

28710 ALTESSA WAY, #102  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

**Current Mailing Address:**

81 WESTERN INDUSTRIAL DRIVE  
STE. D  
CRANSTON, RI 02921

**New Mailing Address:**

**FEI Number:** 38-3721559

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MACCOLL, ANDREW D  
1862 NARRINGTON AVENUE  
NORTH PORT, FL 34288 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: MACCOLL, ANDREW D  
Address: 96 LAKEVIEW DR.  
City-St-Zip: CHAPACHET, RI 02814

Title: MGR ( ) Delete  
Name: ROSSI, VINCENT A  
Address: 410 OLD PLAINFIELD PIKE  
City-St-Zip: SCITUATE, RI 02825

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ANDREW MACCOLL

MGR

01/08/2009

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