


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000088565 1. Entity Name TUSCANA RESORT RENTALS LLC	
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Principal Place of Business 116B POLO PARK EAST BLVD, DAVENPORT, FL 33897	Mailing Address 116B POLO PARK EAST BLVD, DAVENPORT, FL 33897
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DO NOT WRITE IN THIS SPACE



01092008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5513559	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

KENNY, GARRETT J
116B POLO PARK EAST BLVD
DAVENPORT, FL 33897

**DO NOT WRITE
IN THIS SPACE**

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 reinstating) DATE _____

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

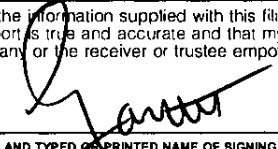
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FELTRIM DEVELOPMENT US INC 116B POLO PARK EAST BLVD DAVENPORT, FL 33897
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02/01/08-80056-019 138.75

**DO NOT WRITE
IN THIS SPACE**

**Please
Sign & Return**

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 I signed 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 119, Florida Statutes.

SIGNATURE:  _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE _____ Date _____ Daytime Phone # _____