2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 14, 2007
Secretary of State

DOCUMENT# L06000108488

Entity Name: TUSCANY SPA, LLC

Current Principal Place of Business:

1535 KILLEARN CENTER BLVD., SUITE A-5
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

1535 KILLEARN CENTER BLVD., SUITE A-5
TALLAHASSEE, FL 32309

New Mailing Address:

FEI Number: 30-0389347 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SILVER, KEVIN
1535 KILLEARN CENTER BLVD., SUITE A-5
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

GAMBLE, GINA
1535 KILLEARN CENTER BLVD., SUITE A-5
TALLAHASSEE, FL 32309 US

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: GINA GAMBLE 06/14/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

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

ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition
Name: GAMBLE, GINA
Address: 3405 NATIVE DANCER TRAIL
City-St-Zip: TALLAHASSEE, FL 32309

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: GINA GAMBLE MGR 06/14/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date