

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90088 046 ****61.25

DOCUMENT # N00000004924

1. Entity Name
TUSCANY AT HERON BAY HOMEOWNERS'
ASSOCIATION, INC.



Principal Place of Business
11784 WEST SAMPLE RD
SUITE 103
CORAL SPRINGS, FL 33065

Mailing Address
11784 WEST SAMPLE RD
SUITE 103
CORAL SPRINGS, FL 33065

00024873

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country



02142007 Chg-NP CR2E037 (12/06)

4. FEI Number
65-1031392

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
KATZMAN & KORR PA
1501 NW 49 ST
STE 202
FORT LAUDERDALE, FL 33309

7. Name and Address of New Registered Agent
Name
United Community Mgmt Corp
Street Address (P.O. Box Number is Not Acceptable)
11784 W. Sample Rd.
City
Coral Springs FL Zip Code
33065

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 Venii Kattawas UP Finance United Comm Mgmt 2/28/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TRICASICO, MAURICE 11575 HERON BAY BLVD. CORAL SPRINGS, FL 33076 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUZANNE MOORE <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5813 N.W. 120th Ave Coral Springs, FL 33076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HOUGH, CHARLES 11575 HERON BAY BLVD CORAL SPRINGS, FL 33076 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Panebianco, Michael <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5817 N.W. 119th Ter Coral Springs, FL 33076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PARROTT, TERRI 11575 HERON BAY BLVD CORAL SPRINGS, FL 33076 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Terri L. Parrott <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5774 N.W. 120th Ave Coral Springs, FL 33076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MAKIN, LYN 15752 NW 119TH DR CORAL SPRINGS, FL 33076 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MICHAEL LAYNE <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5880 N.W. 120th Ave Coral Springs, FL 33076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Joseph Lobl <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5720 N.W. 120th Ave Coral Springs, FL 33076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Terri L. Parrott Terri L. Parrott, Pres Tuscany HOA 3/13/07 954 423-7926
Signature and typed or printed name of signing officer or director Date Daytime Phone #