

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003504

FILED
Jan 16, 2009
Secretary of State

Entity Name: TUSCANY VILLAGE VACATION SUITES OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8122 ARREZZO WAY
ORLANDO, FL 32821

New Principal Place of Business:

Current Mailing Address:

5323 MILLENIA LAKES BLVD
STE 400
ORLANDO, FL 32839

New Mailing Address:

FEI Number: 06-1638873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLOAN, REBECCA
6355 METRO W BLVD STE 180
ORLANDO, FL 32835 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KREIGER, KIM
Address: 6355 METRO W BLVD STE 180
City-St-Zip: ORLANDO, FL 32835

Title: DT () Delete
Name: PIATT, RANDY
Address: 6355 METRO W BLVD STE 180
City-St-Zip: ORLANDO, FL 32835

Title: D () Delete
Name: STEUCK, DENNIS
Address: 495 HURLEY BLVD. SW
City-St-Zip: PALM BAY, FL 32908

Title: DS () Delete
Name: O'CONNER, KAREN
Address: 17847 SOUTH HIGHLAND AVE
City-St-Zip: TINLEY PARK, IL 60477

Title: DV () Delete
Name: HOLLENBECK, RANDALL
Address: 17634 LILAC LANE
City-St-Zip: TINLEY PARK, IL 60477

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KIM R KREIGER

DP

01/16/2009

Electronic Signature of Signing Officer or Director

Date