

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 04, 2009
Secretary of State

DOCUMENT# N01000004664

Entity Name: TUSCAN RIDGE MASTER HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**8297 CHAMPIONSGATE BLVD #518
CHAMPIONSGATE, FL 33896 US**New Principal Place of Business:**932 CORVINA DRIVE
DAVENPORT, FL 33897 US**Current Mailing Address:**8297 CHAMPIONSGATE BLVD #518
CHAMPIONSGATE, FL 33896 US**New Mailing Address:**932 CORVINA DRIVE
DAVENPORT, FL 33897 US**FEI Number:** 59-3730425**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KIMBERLY, DAVIS-CARTER D VP
208 CORVINA DR
DAVENPORT, FL 33897 US**Name and Address of New Registered Agent:**KIMBERLY, DAVIS-CARTER D P
208 CORVINA DR
DAVENPORT, FL 33897 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: KIMBERLY D. DAVIS-CARTER, D/P

04/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D/P () Delete
Name: JOSEPH, MICHELE
Address: 8297 CHAMPIONSGATE BLVD #518
City-St-Zip: CHAMPIONSGATE, FL 33896

Title: D/P () Delete
Name: DAVIS-CARTER, KIMBERLY
Address: 8297 CHAMPIONSGATE BLVD #518
City-St-Zip: CHAMPIONSGATE, FL 33896

Title: D () Delete
Name: WOOD, ROGER
Address: 8297 CHAMPIONSGATE BLVD #518
City-St-Zip: CHAMPIONSGATE, FL 33896

Title: D/T () Delete
Name: HALLIDAY, WILLIAM(BILLY)
Address: 8297 CHAMPIONSGATE BLVD #518
City-St-Zip: CHAMPIONSGATE, FL 33896

Title: D () Delete
Name: YUNKER, JANIS
Address: 8297 CHAMPIONSGATE BLVD # 518
City-St-Zip: CHAMPIONSGATE, FL 33896

Title: D/S (X) Delete
Name: LESLIE, CLARINE
Address: 8297 CHAMPIONSGATE BLVD # 518
City-St-Zip: CHAMPIONSGATE, FL 33896

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change () Addition
Name: DAVIS-CARTER, KIMBERLY
Address: 932 CORVINA DR
City-St-Zip: DAVENPORT, FL 33897

Title: D/P (X) Change () Addition
Name: RODRIGUEZ, LUIS
Address: 932 CORVINA DR
City-St-Zip: DAVENPORT, FL 33897

Title: D (X) Change () Addition
Name: YUNKER, JANIS
Address: 932 CORVINA DR
City-St-Zip: DAVENPORT, FL 33897

Title: D/T (X) Change () Addition
Name: HALLIDAY, WILLIAM(BILLY)
Address: 932 CORVINA DR
City-St-Zip: DAVENPORT, FL 33897

Title: D/S (X) Change () Addition
Name: LESLIE, CLARINE
Address: 932 CORVINA DR
City-St-Zip: DAVENPORT, FL 33897

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: KIMBERLY D. DAVIS-CARTER

D/P

04/04/2009

Electronic Signature of Signing Officer or Director

Date