

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004664

FILED  
Apr 18, 2011  
Secretary of State

**Entity Name:** TUSCAN RIDGE MASTER HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

932 CORVINA DRIVE  
DAVENPORT, FL 33897 US

**New Principal Place of Business:**

8297 CHAMPIONS GATE BLVD #518  
CHAMPIONS GATE, FL 33896 US

**Current Mailing Address:**

932 CORVINA DRIVE  
DAVENPORT, FL 33897 US

**New Mailing Address:**

8297 CHAMPIONS GATE BLVD #518  
CHAMPIONS GATE, FL 33896 US

**FEI Number:** 59-3730425

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

LESLIE, ROBERT  
228 CORVINA DR.  
DAVENPORT, FL 33897 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: DPT  
Name: WINTON, VIC  
Address: 8297 CHAMPIONS GATE BLVD #518  
City-St-Zip: CHAMPIONS GATE, FL 33896 US

Title: DVP  
Name: BEYER, FRED  
Address: 8297 CHAMPIONS GATE BLVD #518  
City-St-Zip: CHAMPIONS GATE, FL 33896 US

Title: DS  
Name: LESLIE, CLARINE  
Address: 8297 CHAMPIONS GATE BLVD #518  
City-St-Zip: CHAMPIONS GATE, FL 33896 US

Title: D  
Name: BRAGG, SCOTT  
Address: 8297 CHAMPIONS GATE BLVD #518  
City-St-Zip: CHAMPIONS GATE, FL 33896 US

Title: D  
Name: JAMESON, KEVIN  
Address: 8297 CHAMPIONS GATE BLVD #518  
City-St-Zip: CHAMPIONS GATE, FL 33896 US

I hereby 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 all other like empowered.

**SIGNATURE:** CLARINE LESLIE

DS

04/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date