2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2006 8:00 am
Secretary of State

03-03-2006 90094 003 ****61.25

DOCUMENT # N03000009492

1. Entity Name
VILLAS DE TUSCANY CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
255 UNIVERSIRY DRIVE CORAL GABLES, FL 33134 US	255 UNIVERSIRY DRIVE CORAL GABLES, FL 33134 US

2. Principal Place of Business	3. Mailing Address
8053 NW 155 Street	8053 NW 155 Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Miami Lakes, Florida	Miami Lakes, Florida
Zip: 33016 / Country: USA	Zip: 33016 / Country: USA

02162006 Chg-NP CR2E037 (11/05)

4. FEI Number 20-1061054 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GUARCH, J.M. JR 710 SOUTH DIXIE HIGHWAY CORAL GABLES, FL 33146	Name: Year Round Management Company Street Address (P.O. Box Number is Not Acceptable): 8053 NW 155 Street City: Miami Lakes FL Zip Code: 33016

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 Arturo Carvajal President YRMC — 02/17/06
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, 2006

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: PD NAME: GARCIA, OSCAR STREET ADDRESS: 255 UNIVERSIRY DRIVE CITY-ST-ZIP: CORAL GABLES, FL 33134	☒ Delete	TITLE: P NAME: Leon Szczepanski STREET ADDRESS: 711 SW 148 Ave. Unit 415 CITY-ST-ZIP: Sunrise, Florida 33325	☐ Change ☐ Addition
TITLE: SD NAME: GUARCH, J.M. STREET ADDRESS: 255 UNIVERSIRY DRIVE CITY-ST-ZIP: CORAL GABLES, FL 33134	☒ Delete	TITLE: TD NAME: Richard Rand STREET ADDRESS: 755 SW 148 Ave. Unit 1101 CITY-ST-ZIP: Sunrise, Florida 33325	☐ Change ☐ Addition
TITLE: VD NAME: ARAN, FERNANDO S STREET ADDRESS: 255 UNIVERSIRY DRIVE CITY-ST-ZIP: CORAL GABLES, FL 33134	☒ Delete	TITLE: SD NAME: Carolyn Emandee STREET ADDRESS: 721 SW 148 Ave. Unit 310 CITY-ST-ZIP: Sunrise, Florida 33325	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Delete	TITLE: VP NAME: Denise L. Salzman STREET ADDRESS: 775 SW 148 Ave. Unit 1610 CITY-ST-ZIP: Sunrise, Florida 33325	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Delete	TITLE: D NAME: Steve Dickenson STREET ADDRESS: 715 SW 148 Ave. Unit 105 CITY-ST-ZIP: Sunrise, Florida 33325	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Delete	TITLE: TD NAME: Jose M. Bello STREET ADDRESS: 705 SW 148 Ave. Unit 209 CITY-ST-ZIP: Sunrise, Florida 33325	☐ Change ☐ 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: (LEON) SZCZEPANSKI — 02-01-06 — (305) 218-8993
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #