2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000010578

FILED Dec 23, 2004 Secretary of State

Entity Name: VILLA TUSCANY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

500 SE 3RD ST

FT LAUDERDALE, FL 33301

Current Mailing Address: New Mailing Address:

500 SE 3RD ST

FT LAUDERDALE, FL 33301

FEI Number: 36-4545200 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

FAZIO, D. FREDRICO MORGAN REAL ESTATE, INC.
633 S ANDREWS AVE, 5TH FLOOR 3696 NORTH FEDERAL HIGHWAY
FT LAUDERDALE, FL 33301 US SUITE 200

FT LAUDERDALE, FL 33308 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: TREY MORGAN 12/23/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DP () Delete Title: PTD (X) Change () Addition

 Name:
 FAZIO, D. FREDRICO
 Name:
 FINKLESTEIN, RON

 Address:
 633 S ANDREWS AVE, 5TH FLOOR
 Address:
 506 SE 7TH STREET, #301

 City-St-Zip:
 FT LAUDERDALE, FL 33301
 City-St-Zip:
 FORT LAUDERDALE, FL 33301

Title: DVS () Delete Title: VPD (X) Change () Addition

Name:GOODCHILD, QUINNName:FITZPATRICK, PHILIPAddress:633 S ANDREWS AVE, 5TH FLOORAddress:506 SE 7TH STREET, #304City-St-Zip:FT LAUDERDALE, FL 33301City-St-Zip:FT LAUDERDALE, FL 33301

Title: D () Delete Title: SD (X) Change () Addition

 Name:
 BALOCCO, JOSEPH M
 Name:
 COLMENARES, MARIA

 Address:
 1323 SE 3RD AVE
 Address:
 506 SE 7TH STREET, #305

 City-St-Zip:
 FT LAUDERDALE, FL 33316
 City-St-Zip:
 FT LAUDERDALE, FL 33301

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RON FINKLESTEIN PTD 12/23/2004