2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002473

FILED Jan 20, 2009 Secretary of State

Entity Name: TUSCANY ISLAND HOMEOWNERS ASSOCIATION, INC.

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

4567 TIGUA ISLAND CT 4482 TUSCANY ISLAND CT. WINTER PARK, FL 32792 WINTER PARK, FL 32792

Current Mailing Address: New Mailing Address:

P.O. BOX 4396 4482 TUSCANY ISLAND CT. WINTER PARK, FL 32793 WINTER PARK, FL 32792

FEI Number: 81-0663135 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WOODRUFF, RICHARD W
4567 TIGUA ISLAND CT
WINTER PARK, FL 32792 US
BENTON, DERRYL
4482 TUSCANY ISLAND CT.
WINTER PARK, FL 32792 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: DERRYL BENTON 01/20/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DP () Delete
 Title:
 PRES (X) Change () Addition

 Name:
 WOODRUFF, RICHARD W
 Name:
 BENTON, DERRYL

 Address:
 4567 TIGUA ISLAND CT
 Address:
 4482 TUSCANY ISLAND CT.

Address: 4367 TIGOA ISLAND CT Address: 4482 TOSCANY ISLAND CT City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: WINTER PARK, FL 32792

Title: D () Delete Title: VP (X) Change () Addition Name: BENNETT, R. LANCE Name: VAN, DAVID

Address: 1431 GOLFSIDE DR Address: 4464 TUSCANY ISLAND CT.
City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: WINTER PARK, FL 32792

Title: SEC. () Change (X) Addition

 Name:
 Name:
 OVERMEYER, LORI

 Address:
 Address:
 4400 TUSCANY ISLAND CT.

 City-St-Zip:
 City-St-Zip:
 WINTER PARK, FL 32792

Title: () Delete Title: TRES () Change (X) Addition

 Name:
 Name:
 ILAGAN, PATRICIA

 Address:
 Address:
 4446 TUSCANY ISLAND CT.

 City-St-Zip:
 City-St-Zip:
 WINTER PARK, FL 32792

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: LORI OVERMEYER SEC 01/20/2009