

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006953

FILED  
Apr 03, 2010  
Secretary of State

**Entity Name:** TUSCANY AT INNISBROOK CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2230 TUSCANY TRACE  
PALM HARBOR, FL 34683

**New Principal Place of Business:**

**Current Mailing Address:**

24701 US HIGHWAY 19 NORTH #102  
CLEARWATER, FL 33763

**New Mailing Address:**

**FEI Number:** 75-3162717

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AMERI-TECH REALTY, INC.  
24701 US HIGHWAY 19 NORTH #102  
CLEARWATER, FL 33763 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: PD  
Name: SOFIA, JANICE  
Address: 2218 PORTOFINO PLACE #247  
City-St-Zip: PALM HARBOR, FL 34683

Title: TD  
Name: KOSS, CAMILLE  
Address: 2250 PORTOFINO PLACE #236  
City-St-Zip: PALM HARBOR, FL 34683

Title: VPD  
Name: SMITH, JEFFREY  
Address: 2107 PORTOFINO PLACE #3026  
City-St-Zip: PALM HARBOR, FL 34683

Title: SD  
Name: GESSNER, KEVIN  
Address: 2277 CHIANTI PLACE #37  
City-St-Zip: PALM HARBOR, FL 34683

Title: D  
Name: PEREZ, MICHAEL  
Address: 280 TURTLE CREEK CIRCLE  
City-St-Zip: OLDSMAR, FL 34677

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: JANICE SOFIA

PD

04/03/2010

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

\_\_\_\_\_  
Date