

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003346

FILED  
Apr 12, 2011  
Secretary of State

**Entity Name:** TOSCANA II AT RENAISSANCE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

409 E. COLLEGE AVE  
RUSKIN, FL 33570

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1058  
RUSKIN, FL 33575

**New Mailing Address:**

**FEI Number:** 20-3676065

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILSON, LOU ELLEN  
409 E. COLLEGE AVE  
RUSKIN, FL 33570 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: D  
Name: SAROSY, RAYMOND  
Address: 1429 EMERALD DUNES DRIVE  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: DT  
Name: ANDERSON, WILLIAM P JR  
Address: 1413 EMERALD DUNES DRIVE  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: DS  
Name: JONES, ROOSEVELT  
Address: 1420 EMERALD DUNES DRIVE  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: DP  
Name: ENYART, JAMES N  
Address: 1408 EMERALD DUNES DRIVE  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: DVP  
Name: KNOCK, DAVID L  
Address: 1410 EMERALD DUNES DRIVE  
City-St-Zip: SUN CITY CENTER, FL 33573

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: JAMES ENYART

DP

04/12/2011

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

\_\_\_\_\_  
Date