

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007251

FILED
Jan 06, 2012
Secretary of State

Entity Name: TUSCANY VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2686 MIDDLE COUNTRY RD
LAKE GROVE, NY 11752

New Principal Place of Business:

11691 GATEWAY BLVD.
203
FORT MYERS, FL 33913

Current Mailing Address:

2686 MIDDLE COUNTRY RD
LAKE GROVE, NY 11752

New Mailing Address:

11691 GATEWAY BLVD.
203
FORT MYERS, FL 33913

FEI Number: 20-4410048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, LEE
ISLAND DEVELOPMENT LLC
3701 CHIQUITA BLVD S
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

VISION ASSOCIATION MANAGEMENT
TUSCANY VILLAS CONDOMINIUM
11691 GATEWAY BLVD. , SUITE 203
FORT MYERS, FL 33913 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: VALERIEN@VISIONGOLFMANAGEMENT.COM

01/06/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: CRIMALDI, JOE
Address: 11691 GATEWAY BLVD., SUITE 203
City-St-Zip: FORT MYERS, FL 33913

Title: VP
Name: WANGFER, RYAN
Address: 11691 GATEWAY BLVD., SUITE 203
City-St-Zip: FORT MYERS, FL 33913

Title: ST
Name: CRIMALDI, ALISA
Address: 11691 GATEWAY BLVD., SUITE 203
City-St-Zip: FORT MYERS, FL 33913

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: VALERIEN@VISIONGOLFMANAGEMENT.COM

CAM

01/06/2012

Electronic Signature of Signing Officer or Director

Date