2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000008343

FILED Dec 01, 2011 Secretary of State

Entity Name: TUSCANY NO. 6 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

MIAMI MANAGEMENT, INC. 1145 SAWGRASS CORPORATE PKWY

2150 WEST 68 ST. #205

SUNRISE, FL 33323

HIALEAH, FL 33016

Current Mailing Address:

New Mailing Address:

MIAMI MANAGEMENT, INC

P.O. BOX 160310

1145 SAWGRASS CORPORATE PKWY

HIALEAH, FL 33016 US

SUNRISE, FL 33323 FEI Number: 20-3328443

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:

BAKALAR&EICHNER, P.A 150 SOUTH PINES ISLAND RD SUITE 540

NEIGHBORHOOD PROPERTY MANAGEMENT, INC 2150 WEST 68 ST.

NEIGHBORHOOD PROPERTY MANAGEMENT, INC.

#205

PLANTATION, FL 33324 US

HIALEAH, FL 33016 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: MANUEL SOSA

Electronic Signature of Registered Agent

Date

12/01/2011

OFFICERS AND DIRECTORS:

SOSA, MANUEL Name: Address: 2150 WEST 68 ST #205 City-St-Zip: HIALEAH, FL 33016

Title: VP/T

Name: BAROZ, OREN Address: 2150 WEST 68 ST #205 City-St-Zip: HIALEAH, FL 33016

Title:

BENITEZ, DAVID Name: 2150 WEST 68 ST #205 Address: City-St-Zip: HIALEAH, FL 33016

Title: DIR

Name: GREY, GRACE A 2150 WEST 68 ST #205 Address: City-St-Zip: HIALEAH, FL 33016

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: MANUEL SOSA PD 12/01/2011