

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000480

FILED
May 10, 2007
Secretary of State

Entity Name: THE TUSCANY AT MARSH LAKES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

95056 TUSCANY WAY
FERNANDINA BEACH, FL 32035

New Principal Place of Business:

Current Mailing Address:

PO BOX 6086
FERNANDINA BEACH, FL 32035

New Mailing Address:

FEI Number: 20-5795963 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

JACOBS, ARTHUR I
961687 GATEWAY BLVD, STE 2011
FERNANDINA BEACH, FL 32034 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: AMES, CHARLES D
Address: 8140 WALNUT HILL LANE, STE 620
City-St-Zip: DALLAS, TX 75231

Title: DVP (X) Delete
Name: MARX, RANDY
Address: 1130 EAST ARAPAHO, SUITE 580
City-St-Zip: RICHARDSON, TX 75081

Title: DS (X) Delete
Name: SMITH, LUANNE
Address: PO BOX 6086
City-St-Zip: FERNANDINA BEACH, FL 32035

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: AMES, CHARLES D
Address: 14881 QUORUM DRIVE, #950
City-St-Zip: DALLAS, TX 75254

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHARLES D. AMES

PRES

05/10/2007

Electronic Signature of Signing Officer or Director

Date