2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT **DOCUMENT # N06000001982** 1. Entity Name

FILED
Sep 10, 2008 8:00 am
Secretary of State
09-10-2008 90001 013 ****61.25

TUSCANY POINTE VILLAS CONDOMINIUM ASSOCIATION, INC.								
Principal Place 8440 SW 8 S #306-A MIAMI, FL 3		Mailing Address 8440 SW 8 STREET #306-A MIAMI, FL 33144			2011 2200 2201 2201 2201 2201 200 200 20	I (11178 10108) (0110 111	III 11 A A A	
30		3. Mailing Address 300 Ar 0901	OO Aragon AULAUR					
Suite, Apt, #, etc. S		Sulte, Apt. #, etc. Suffe 210	ulte, Apt. #, etc. U/ + 2/0		07112008 Chg-NP CR2E037 (12/06)			
			Custe 210 City & State Coral Gables, Fl		CABLE		oplied For ot Applicable	
Žip	Country	Zip 3313 Y	Country USA	5. Certificate of Sta	atus Desired	\$8.75 Add Fee Require		
	6. Name and Address of Current F	legistered Agent	Name	7. Name and Add	ress of New Registere	d Agent		
QUINDEMIL, TERESA L				Street Address (P.O. Box Number is Not Acceptable)				
8965 SW 11 STREET MIAMI, FL 33174			Street Address	(P.O. Box Number is N	NOT Acceptable)		<u></u>	
			City		F	L Zip Code	e	
	named entity submits this statement for	the purpose of changing its re	gistered office or registe	red agent, or both, in	the State of Florida. 1 a	m familiar with,	and accept	
the obligat	tions of registered agent.							
SIGNATURE	Signature, typed or printed name of registered agent is	nd title if applicable. (NOTE: R	legistered Agent argnature require	d when renstating)	DATE			
			1 40	· " 1				
	Filing Fee is \$61.25	9. Election Camp		\$5.00 May Be		ck payable to		
	ue by September 12, 2008	Trust Fund Cor	ntribution.	Added to Fees	Florida Dep	artment of St	tate	
10.	ue by September 12, 2008 OFFICERS AND DIR	Trust Fund Cor	ntribution.	Added to Fees ADDITIONS/CHANGE		artment of SI	i 10	
	ue by September 12, 2008	Trust Fund Cor	11.	Added to Fees ADDITIONS/CHANGE	Fiorida Dep	DIRECTORS IN Change	tate	
10. TITLE NAME STREET ADDRESS	OFFICERS AND DIR OFFICERS AND DIR PD MCDONALD, MARK 8440 SW 8 STREET #306-A	Trust Fund Cor	11. TITLE PO MAME STREET ADDRESS	Added to Fees ADDITIONS/CHANGE	Florida Dep	DIRECTORS IN Change	tate	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIR OFFICERS AND DIR PD MCDONALD, MARK 8440 SW 8 STREET #306-A MIAMI, FL 33144	Trust Fund Cor	11. TITLE PO MANE STREET ADDRESS CITY-ST-ZIP	added to Fees ADDITIONS/CHANGE adalia f	Florida Dep	DIRECTORS IN Change	1 10 Addition	
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indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 4