2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003661

FILED Mar 09, 2009 Secretary of State

Entity Name: TUSCANY PLACE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2884 S. OSCEOLA AVE ORLANDO, FL 32806

Current Mailing Address: New Mailing Address:

2884 S. OSCEOLA AVE ORLANDO, FL 32806

FEI Number: 20-4675761 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:

DIAZ, VICKI FERDINADSEN ENTERPRISES, INC WORLD OF HOMES 2884 S. OSCEOLA AVE ORLANDO, FL 32806 US ORLANDO, FL 32806 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: VICKI DIAZ 03/09/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: DIVJAK, DAN Name: STEVENS, RICK Address: 151 SOUTH HALL LANE STE. 200 Address: 400 S PARK AVE

City-St-Zip: MAITLAND, FL 32751 City-St-Zip: WINTER PARK, FL 32789

Title: V () Delete Title: V (X) Change () Addition Name: PIAZZA, KETICA Name: KIRWAN, GLENN

Address: 151 SOUTH HALL LANE STE 200 Address: 400 S PARK AVE

City-St-Zip: MAITLAND, FL 32751 City-St-Zip: WINTER PARK, FL 32789

Title: ST () Delete Title: ST (X) Change () Addition Name: WRIGHT, MATTHEW Name: WILINSKI, BONNIE

Address: 151 SOUTHHALL LANE STE 200 Address: 400 S PARK AVE
City-St-Zip: MAITLAND, FL 32751 City-St-Zip: WINTER PARK, FL 32789

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: BRYAN MERCED CAM 03/09/2009