

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000006488

FILED
Jul 10, 2008
Secretary of State

Entity Name: TUSCANA AT SANDESTIN HOA, INC.

Current Principal Place of Business:

4507 FURLING LANE, STE. 206
DESTIN, FL 32541

New Principal Place of Business:

10221 EMERALD COAST PARKWAY WEST
SUITE 23
MIRAMAR BEACH, FL 32550

Current Mailing Address:

4507 FURLING LANE, STE. 206
DESTIN, FL 32541

New Mailing Address:

10221 EMERALD COAST PARKWAY WEST
SUITE 23
MIRAMAR BEACH, FL 32550

FEI Number: 20-5283852 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:

MCNEESE, RICHARD S.
36468 EMERALD COAST PARKWAY, STE. 1201
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

GELDER, JAY B
10221 EMERALD COAST PARKWAY WEST
SUITE 23
MIRAMAR BEACAH, FL 32550 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: JAY B. GELDER

07/10/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KOLAR, DAVID
Address: 4507 FURLING LANE, STE. 206
City-St-Zip: DESTIN, FL 32541

Title: DS () Delete
Name: SLAUGHTER, HOLLY
Address: 4507 FURLING LANE, STE. 206
City-St-Zip: DESTIN, FL 32541

Title: DT (X) Delete
Name: HENDON, WENDY
Address: 4507 FURLING LANE, STE. 206
City-St-Zip: DESTIN, FL 32541

Title: V (X) Delete
Name: BROADERIP, BRENT
Address: 4507 FURLING LANE, STE. 206
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change () Addition
Name: BROADERIP, BRENT
Address: 8937 E. BELL ROAD, SUITE 202
City-St-Zip: SCOTTSDALE, AZ 85260

Title: DVPS (X) Change () Addition
Name: SLAUGHTER, HOLLY
Address: 8937 E. BELL ROAD, SUITE 202
City-St-Zip: SCOTTSDALE, AZ 85260

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: HOLLY SLAUGHTER

DVPS

07/10/2008

Electronic Signature of Signing Officer or Director

Date