2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005 8:00 am
Secretary of State
03-21-2005 90073 006 ****61.25

DOCUMENT # N28730

1. Entity Name
TUSCANY AT THE VINEYARDS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
75 VINEYARDS BLVD. 3RD FLOOR NAPLES, FL 34119 US	75 VINEYARDS BLVD. 3RD FLOOR NAPLES, FL 34119 US

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01192005 No Chg-NP CR2E037 (10/03)

4. FEI Number
65-0103863
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PROPERTY MANAGEMENT PROFESSIONALS, INC.
75 VINEYARDS BLVD.
3RD FL
NAPLES, FL 34119

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	LONG, TOM
STREET ADDRESS	102 TUSCANA CT, #903
CITY-ST-ZIP	NAPLES, FL 34119
TITLE	PD
NAME	AUBUCHON, BOB
STREET ADDRESS	104 SIENA WAY #1408
CITY-ST-ZIP	NAPLES, FL 34119
TITLE	TD
NAME	D'ANNUNZIO, DOMINIC
STREET ADDRESS	~~100 SIENA WAY~~ 103 TUSCANA CT. #1108
CITY-ST-ZIP	NAPLES, FL 34119
TITLE	D HEALHY, FRANK
NAME	~~BERLIHY, FRANK~~
STREET ADDRESS	108 TUSCANA COURT #601
CITY-ST-ZIP	NAPLES, FL 34119
TITLE	SD
NAME	~~GILLIS, MARY ANN~~ BAUMAN, JOHN D.
STREET ADDRESS	~~102 SIERA WAY # 1304~~ 108 TUSCANA CT. #602
CITY-ST-ZIP	NAPLES, FL 34119
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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: D. D'Annunzio 3-3-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #