

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40592

FILED
Mar 12, 2009
Secretary of State

Entity Name: TUSCANY HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 770911
WINTER GARDEN, FL 34777 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 770911
WINTER GARDEN, FL 34777 US

New Mailing Address:

FEI Number: 59-3042289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARBUCKLE, MICHELLE
1664 VICTORIA WAY
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

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: T () Delete
Name: ARBUCKLE, MICHELLE
Address: 1664 VICTORIA WAY
City-St-Zip: WINTER GARDEN, FL 34787

Title: S () Delete
Name: ARBUCKLE, MICHELLE
Address: 1664 VICTORIA WAY
City-St-Zip: WINTER GARDEN, FL 34787

Title: P () Delete
Name: HORSLEY, KENT
Address: 1679 VICTORIA WAY
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: BAILEY, DONNA
Address: 1607 HIGH HAMPTON COURT
City-St-Zip: WINTER GARDEN, FL 34787

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: MICHELLE ARBUCKLE

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03/12/2009

Electronic Signature of Signing Officer or Director

_____ Date