

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000007373

Entity Name: TUSCANY VILLAGE, INC.

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

235 OCALA ROAD SOUTH
TALLAHASSEE, FL 32304

New Principal Place of Business:

2020 WEST PENSACOLA STREET
SUITE 27
TALLAHASSEE, FL 32304 US

Current Mailing Address:

P.O. BOX 2535
TALLAHASSEE, FL 323162535

New Mailing Address:

FEI Number: 59-3357585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEONI, STEVEN M
2020 WEST PENSACOLA ST.
STE. 27
TALLAHASSEE, FL 32304 US

Name and Address of New Registered Agent:

LEONI, STEVEN M
2020 WEST PENSACOLA ST.
SUITE 27
TALLAHASSEE, FL 32304 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:

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEONI, STEVEN M
Address: P.O. BOX 2535
City-St-Zip: TALLAHASSEE, FL 323162535

Title: ST () Delete
Name: LEONI, RENE N
Address: 19490 SAWGRASS DR, #1801
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEONI, STEVEN M
Address: P.O. BOX 2535
City-St-Zip: TALLAHASSEE, FL 32316 US

Title: ST (X) Change () Addition
Name: LEONI, RENE N
Address: 19490 SAWGRASS DR, #1801
City-St-Zip: BOCA RATON, FL 33434 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN M. LEONI

D

04/28/2009

Electronic Signature of Signing Officer or Director

Date