I hereby 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 all other like empowered.

MGR

SIGNATURE: HUSNI CHARARA

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N15000010024

Entity Name: TUSCAN PLACE MEDICAL AND PROFESSIONAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

326 DEL PRADO BLVD N CAPE CORAL, FL 33909

Current Mailing Address:

28089 VANDERBILT DRIVE SUITE 201 BONITA SPRINGS, FL 34134 US

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

TAX & FINANCIAL STRATEGISTS LLC 28089 VANDERBILT DRIVE SUITE 201 BONITA SPRINGS, FL 34134 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	: HCHARARA			01/30/2021
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PD	Title	VSD	
Name	DAOUD, MAZEN	Name	CHARARA, HUSNI A	
Address	12580 UNIVERSITY DR	Address	14300 RIVA DEL LAGO DR	
City-State-Zip:	FORT MYERS FL 33907	City-State-Zip:	FORT MYERS FL 33907	
Title	TD			
Name	HACHEM, DONIA M			
Address	14300 RIVA DEL LAGO DR			
City-State-Zip:	FORT MYERS FL 33907			

Certificate of Status Desired: No

FILED Jan 30, 2021 Secretary of State 8612804988CC

Date

01/30/2021