

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000686

FILED
Jan 29, 2013
Secretary of State
CC3371859338**Entity Name:** TUSCANY POINTE PHASE 1 HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**2884 S OSCEOLA AVENUE
ORLANDO, FL 32806**Current Mailing Address:**2884 S OSCEOLA AVENUE
ORLANDO, FL 32806**FEI Number: 59-3554915****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**FERDINANDSEN ENTERPRISES, INC.
2884 S. OSCEOLA AVENUE
ORLANDO, FL 32806 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title VP
Name BONILLA, TONY
Address 2884 S. OSCEOLA AVE.
City-State-Zip: ORLANDO FL 32806Title S
Name SHOEMAKER, DON
Address 2884 S. OSCEOLA AVE
City-State-Zip: ORLANDO FL 32806Title D
Name VOTAPKA, KEN
Address 2884 S. OSCEOLA AVE
City-State-Zip: ORLANDO FL 32806Title D
Name AYALA, JOSE
Address 2884 S. OSCEOLA AVE
City-State-Zip: ORLANDO FL 32806Title T
Name AVILES, JUAN
Address 2884 S. OSCEOLA AVE
City-State-Zip: ORLANDO FL 32806Title P
Name CHARRY, DAVID
Address 2884 S. OSCEOLA AVE
City-State-Zip: ORLANDO FL 32806

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.

SIGNATURE: DAVID CHARRY**PRESIDENT****01/29/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date