

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2001 8:00 am
Secretary of State

01-29-2001 90166 045 ****61.25

DOCUMENT # 740586

1. Entity Name

TIMBERCREEK HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business

Mailing Address

% SANDRA HAAG
 2801 N MILITARY TRAIL
 BOCA RATON FL 33431

% SANDRA HAAG
 2801 N MILITARY TRAIL
 BOCA RATON FL 33431

706656



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1797551

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAAG, DAVID
2801 N MILITARY TRAIL
BOCA RATON FL 33431

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: PD Delete
 NAME: MORGAN, MICHAEL
 STREET ADDRESS: 2888 NW 24TH TERRACE
 CITY-ST-ZIP: BOCA RATON FL

TITLE: SD Change Addition
 NAME: BISHOP, VALERIE
 STREET ADDRESS: 2600 TIMBERCREEK CIRCLE
 CITY-ST-ZIP: BOCA RATON, FL 33431

TITLE: VPD Delete
 NAME: DORNBLASER, ROBERT
 STREET ADDRESS: 2415 TIMBERCREEK CIRCLE
 CITY-ST-ZIP: BOCA RATON FL 33431

TITLE: TD Change Addition
 NAME: LUZZI, MICHAEL
 STREET ADDRESS: 2351 TIMBERCREEK CIRCLE
 CITY-ST-ZIP: BOCA RATON, FL 33431

TITLE: S Delete
 NAME: THOMAS, JOAN
 STREET ADDRESS: 2898 N W-24 COURT
 CITY-ST-ZIP: BOCA RATON FL 33431

TITLE: VPD Change Addition
 NAME: NELLES, MATTHEW
 STREET ADDRESS: 2370 NW 26TH STREET
 CITY-ST-ZIP: BOCA RATON, FL 33431

TITLE: TD Delete
 NAME: LOUGHNEY, KEVIN
 STREET ADDRESS: 2877 NW 24TH TERRACE
 CITY-ST-ZIP: BOCA RATON FL

TITLE: D Change Addition
 NAME: SENYSHYN, WILLIAM
 STREET ADDRESS: 2750 TIMBERCREEK CIRCLE
 CITY-ST-ZIP: BOCA RATON, FL 33431

TITLE: D Delete
 NAME: MACK, PAUL
 STREET ADDRESS: 2401 TIMBERCREEK CIR
 CITY-ST-ZIP: BOCA RATON FL 33431

TITLE: PD Change Addition
 NAME: [Blank]
 STREET ADDRESS: [Blank]
 CITY-ST-ZIP: [Blank]

TITLE: [Blank] Delete
 NAME: [Blank]
 STREET ADDRESS: [Blank]
 CITY-ST-ZIP: [Blank]

TITLE: [Blank] Change Addition
 NAME: [Blank]
 STREET ADDRESS: [Blank]
 CITY-ST-ZIP: [Blank]

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:

Paul Mack **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/01

Date

561-241-0285

Daytime Phone #

CR2E037 (10/00)