


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90058 029 ****61.25

DOCUMENT # 740586

1. Entity Name
TIMBERCREEK HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business 2295 CORPORATE BLVD. NW SUITE 138 BOCA RATON, FL 33431	Mailing Address 2295 CORPORATE BLVD. NW SUITE 138 BOCA RATON, FL 33431
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60018774



DO NOT WRITE IN THIS SPACE

01062006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-1797551	Applied For
	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

HAAG, DAVID
 2295 N.W. CORPORATE BLVD.
 SUITE 138
 BOCA RATON, FL 33431

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BISHOP, VALERIE 2600 TIMBERCREEK CIRCLE BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LOUGHNEY, KEVIN 2878 N.W. 24 CT. BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MENOEZ, FRANK MENDEZ, FRANK 2701 TIMBERCREEK CIR BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SENYSHYN, WILLIAM 2750 TIMBERCREEK CIRCLE BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRANDWEIN, GARY 2401 NW 26TH ST BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: William Senyshyn V.P. 1/22/2006

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #