

FILE NOW: FILING FEE IS \$61.25

FILED

**May 11 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT **1998**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 742892 (3)

1. Corporation Name
THE TIMBERS HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business
431 WAVERLY TALLAHASSEE FL 32312

Mailing Address
431 WAVERLY TALLAHASSEE FL 32312

3. Date Incorporated or Qualified
05/17/1978

4. FEI Number
59-2027146

Applied For
 Not Applicable

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

22. City & State

23. Zip Country

24. Zip Country

25. Zip Country

26. Zip Country

27. Suite, Apt. #, etc.

28. City & State

29. Zip Country

30. Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**ISAACS, DAN L
431 WAVERLY
TALLAHASSEE FL 32312**

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

85. Zip Code **FL**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

| | | |
|----------------|----------------------------------|--|
| TITLE | ST | <input type="checkbox"/> DELETE |
| NAME | WALLACE, HEATHER | |
| STREET ADDRESS | 2319-A MISSION RD | |
| CITY-ST-ZIP | TALLAHASSEE FL 32304 | |
| TITLE | D | <input checked="" type="checkbox"/> DELETE |
| NAME | LOWE, WALTER | |
| STREET ADDRESS | 2186 TIMBERWOOD CIRCLE N. | |
| CITY-ST-ZIP | TALLAHASSEE FL | |
| TITLE | P | <input type="checkbox"/> DELETE |
| NAME | CHERRY, GARY | |
| STREET ADDRESS | 9036 MUIRFIELD COURT | |
| CITY-ST-ZIP | TALLAHASSEE FL 32312 | |
| TITLE | TD | <input checked="" type="checkbox"/> DELETE |
| NAME | WALLACE, HEATHER | |
| STREET ADDRESS | 2319A MISSION RD | |
| CITY-ST-ZIP | TALLAHASSEE FL | |
| TITLE | D | <input checked="" type="checkbox"/> DELETE |
| NAME | WAAS, HARRIE H. | |
| STREET ADDRESS | 3797 SALLY LANE | |
| CITY-ST-ZIP | TALLAHASSEE FL | |
| TITLE | VP | <input checked="" type="checkbox"/> DELETE |
| NAME | MARLETT, D AVID | |
| STREET ADDRESS | 2220 TIMBERWOOD CIRCLE S | |
| CITY-ST-ZIP | TALLAHASSEE FL | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|--------------------|--|
| 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | |
| 1.4 CITY-ST-ZIP | |
| 2.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | Joseph R. hong |
| 2.3 STREET ADDRESS | 799 Timberway Court |
| 2.4 CITY-ST-ZIP | Tallahassee, FL 32304 |
| 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | 300002518733 |
| 3.3 STREET ADDRESS | -05/11/98--01085--021 |
| 3.4 CITY-ST-ZIP | ***61.25 |
| 4.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | Marianne Royals |
| 4.3 STREET ADDRESS | 2251-A Mission Road |
| 4.4 CITY-ST-ZIP | Tallahassee, FL 32304 |
| 5.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | Charles Barber |
| 5.3 STREET ADDRESS | 2230 Timberwood Circle North |
| 5.4 CITY-ST-ZIP | Tallahassee, FL 32304 |
| 6.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | John Johnson |
| 6.3 STREET ADDRESS | 2319-A Mission Road |
| 6.4 CITY-ST-ZIP | Tallahassee, FL 32304 |

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Jesse Gary Cherry, Jr.* **4/30/98 (850)668-7993**

CR2E087 (10/97)