FILE NOW: FILING FEE IS \$61.25

<u>...NONB</u>ROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT #**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Timbers Home owner Assec

1. Corporation Name HE TIMBERS HOMEOWNER'S
HSSOCIATION, INC. Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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May 13, 1999 8:00 am Secretary of State

Applied For

\$8.75 Additional

Fee Required

Not Applicable

05-13-1999 90018 018 ****61.25

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

-2027/46

5/17/1978

Zip	Country	Zip	Co	untry	•	6. Election Campaign Financing		\$5.00	\$5.00 May Be	
	25	29	30	_		Trust Fund Contribution		Added to Fees		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
			-	81	Name					
					Stroot Adde	ess (P.O. Box Number is Not Accepta	hie)			
				82	Sileer Addi	ess (F.O. Box Number is Not Accepta	Dia)			
				83						
								T-1 - 0		
				84	City		FI.	85 Zip C	ode	
11. Pursuan	t to the provisions of Sections 617.0502 registered agent, or both, in the State of	and 617.1508, Florid	da Statutes, the a	above d by	e-named corp	oration submits this statement for the	purpose of t the appoi	changing its of	egistered	
agent. I	am familiar with, and accept the obligation	ons of, Section 617.0	503, Florida Sta	tutes						
SIGNATURE	=									
-	Signature, typed or printed name of registered agent a			_ <u>-</u> _	nt signature require		DATE		20.11.10	
12	OFFICERS AND		13.			ADDITIONS/CHANGES TO OF	ICERS AN			
TITLE	₽ •	LJ DE	ELETE 11T	ITLE				☐ Change	Addition	
NAME	I. R. Lone		1.2 N	IAME						
STREET ADDRESS	5 799 Timbermay Coust	•	1.3 S	TREET	T ADDRESS					
CITY-ST-ZIP	Tallahossee F	L 32204	1.4 0	TY-S	T- ZIP					
TITLE	D	☐ Di	ELETE 2.1 T	ITLE				Change	Addition	
NAME	Jose Gary Cherry		2.2 N	IAME						
STREET ADDRESS	s and Muicheld Court	•	235	TREE	T ADDRESS					
CITY-ST-ZIP	Tallyhosgee FL	32312	2 4 1	ONY-S	ST-ZIP					
TITLE	3 18	☐ DI	ELETE 3.1 T	MΕ				Change	☐ Addition	
NAME	Valle Viladale		3.2 N	IAME						
STREET ADDRESS	S 200 1 223 R	Mission Ry	3.3 9	TREE	T ADDRESS					
CITY-ST-ZIP	FL FL	3 230	34.0	CITY-S	ST-ZIP			_		
TITLE	7 7	DI	ELETE 4.1 T	TTLE				☐ Change	Addition	
NAME	P 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		4.21	NAME					ļ	
STREET ADDRESS	Haather Wallace		4.3 9	TREET	TADDRESS					
CITY-ST-ZIP	1319 A //1155100 KU	C1 3220)	£ 4.4 C	ITY-S	T- 2 IP					
TITLE	Tall		ELETE 5.1 T	MLE				Change	Addition	
NAME	Marianne Royals		5.2 N	IAME						
STREET ADDRES			5.3 9	TREE	TADDRESS					
CITY-ST-ZIP	To la scene Fh	3234	5.4 0	ITY-S	T- ZIP					
TITLE	D		ELETE 6.1 T	ITLE				☐ Change	☐ Addition	
NAME	Cruz Pondolo do los com	_	6.2 N	AME						
STREET ADDRESS	\$ 3376 & hoke hore	Drike	6.3 5	TREE1	TADDRESS					
CITY-ST-ZIP	Tallahar See El	323/2-	6.4 0	TY-S	T-ZIP				,	
44 I horoby	certify that the information supplied with	this filing does not d	qualify for the exe	empti	ion stated in S	Section 119.07(3)(i), Florida Statutes.	further cer	tify that the ir	formation	
indicated officer of	d on this annual report or supplemental a r director of the corporation or the receive or Block 13 if changed, or of an attach	innual report is true er or trustee empow	and accurate and ered to execute t	thai	t my signature eport as requi	e shall have the same legal effect as it	made undi	er oatn: mat i	am an	