FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 27 AM 8:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **746159** **(3)**

1. Corporation Name

THE TIMBERS OF BOCA HOMEOWNERS ASSOCIATION, INC

Principal Place of Business	Mailing Address
C/O HAWK-EYE MANAGEMENT INC. 3901 N. FEDERAL HWY., STE 202 BOCA RATON FL 33431	C/O HAWK-EYE MANAGEMENT INC. 3901 N. FEDERAL HWY., STE 202 BOCA RATON FL 33431

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/07/1979
3a. Date of Last Report: 04/27/1994
4. FEI Number: 59-2144545 ☐ Applied For ☐ Not Applicable
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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

PATTI, PAUL N.
% HAWK-EYE MANAGEMENT INC.
3901 N. FEDERAL HWY., STE 202
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City **FL** 05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	D	☒ Change ☐ Addition
NAME	HASTINGS, WAYNE	12 NAME	KAMP, GUNTHER	
STREET ADDRESS	21284 HAZLEWOOD LANE	13 STREET ADDRESS	21274 Hazelwood Lane	
CITY-ST-ZIP	BOCA RATON FL 33428	14 CITY-ST-ZIP	Boca Raton, FL 33428	
TITLE	PD	21 TITLE		☐ Change ☐ Addition
NAME	BRYAN, DIANE B	22 NAME		
STREET ADDRESS	21174 WHITE OAK AVE.	23 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33428	24 CITY-ST-ZIP		
TITLE	TD	31 TITLE		☐ Change ☐ Addition
NAME	PULEO, JOHN	32 NAME		
STREET ADDRESS	21124 WHITE OAK AVENUE	33 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33428	34 CITY-ST-ZIP		
TITLE	D	41 TITLE		☐ Change ☐ Addition
NAME	ARIAS, HAROLD	42 NAME		
STREET ADDRESS	21125 WHITE OAK AVE.	43 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33428	44 CITY-ST-ZIP		
TITLE	DS	51 TITLE		☐ Change ☐ Addition
NAME	BLANCHARD, KAY	52 NAME		
STREET ADDRESS	21144 WHITE OAK AVE	53 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33428	54 CITY-ST-ZIP		
TITLE	DV	61 TITLE		☐ Change ☐ Addition
NAME	BURTON, JOHN	62 NAME		
STREET ADDRESS	21150 WHITE OAK AVE	63 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33428	64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Diane B. Bryan 4/19/95 407-392-1601
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Diane B. Bryan President — Date — Daytime Phone #

001181