


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 23, 2007 8:00 am
Secretary of State

03-23-2007 90022 010 ****61.25

DOCUMENT # N03000005133	
1. Entity Name	
VILLAS OF TIMBERLIN PARC CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business	Mailing Address
7701 TIMBERLIN PARK BLVD. JACKSONVILLE FL 32256-5436	7701 TIMBERLIN PARK BLVD. JACKSONVILLE FL 32256-5436

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number	Applied For
14-1890323	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
MAY MANAGEMENT SERVICES, INC. A1A SOUTH SAINT AUGUSTINE FL 32080

7. Name and Address of New Registered Agent
Name: <u>JEFFREY L. HILL</u>
Street Address (P.O. Box Number is Not Acceptable): <u>7701 TIMBERLIN PARK BLVD</u>
City: <u>JACKSONVILLE</u> FL <u>32256-5436</u>

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: <u>[Signature]</u> PRESIDENT VILLAS OF TIMBERLIN PARC CONDOMINIUM ASSOCIATION, INC.	DATE: <u>03/10/2007</u>

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GUFFEY, DON 7701 TIMBERLIN PK BLVD., #1311 JACKSONVILLE FL 32256 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JEFFREY L. HILL 7701 TIMBERLIN PARK BLVD JACKSONVILLE FL 32256-5436 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RIGGINS, TOMMY 7701 TIMBERLIN PK. BLVD., #623 JACKSONVILLE FL 32256 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PHYLLIS L. KOPYTKO 7701 TIMBERLIN PARK BLVD JACKSONVILLE FL 32256-5436 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CAREY, WILLIAM 7701 TIMBERLIN PK. BLVD., #1635 JACKSONVILLE FL 32256 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ASSION, SUE 7701 TIMBERLIN PK., BLVD., #1612 JACKSONVILLE FL 32256 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHAYNA J. DUDDERAR 7701 TIMBERLIN PARK BLVD JACKSONVILLE FL 32256-5436 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LEROY MCINTOSH 7701 TIMBERLIN PARK BLVD JACKSONVILLE FL 32256-5436 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <u>[Signature]</u>	DATE: <u>03/10/2007</u>	PHONE: <u>(904) 735-2498</u>
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