## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 22, 2007 8:00 am Secretary of State

01-22-2007 90092 024 \*\*\*\*61.25

DOCUMENT # N0500007889  1. Entity Name TIMBERWOOD TOWNHOMES CONDOMINIUM ASSOCIATION, INC.					<u>պ</u> Մ Ն	01-22-200 • -	7 30032 (	<i>3</i> 24 C	71.25
Principal Place of Business 536 NORTH MONROE STREET TALLAHASSEE, FL 32301  Mailing Address 536 NORTH MONROE STREET TALLAHASSEE, FL 32301  TALLAHASSEE, FL 32301									
Principal Place of Business - No P.O. Box #     3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01092007	Chg-NP	CR2E0	37 (12/06)	
City & State		City & State			4. FEI Number 20-4660	416		<del></del>	oplied For
Zip	Country	Zip	Country		5. Certificate of	Status Desired		\$8.75 Add Fee Required	ditional
	6. Name and Address of Current	Registered Agent			7. Name and A	ddress of New	Registered	Agent	
SUITE 400	NROE STREET		Name Street Ad	ddress (	P.O. Box Number	is Not Acceptab	ole)		
IALLAHA	33EE, FE 32301		City			<del></del>	FL	Zip Code	e
	named entity submits this statement fi ions of registered agent.	or the purpose of changing its	registered office or	register	ed agent, or both	, in the State of F	Florida. I am	familiar with,	and accept
SIGNATURE	Signature. Noted or printed name of registered ager	t and title if applicable. (NOT	E: Registered Agent signatu	ure required	d when reinstating)		DATE		
SIGNATURE	Signature. Nood or printed name of registered ager Filling Fee is \$61.25 Due by May 1, 2007	9. Election Car	mpaign Financing	ure required	\$5.00 May Be Added to Fees		Make chec	k payable t	
SIGNATURE	Filing Fee is \$61.25	9. Election Car Trust Fund (	mpaign Financing		\$5.00 May Be	Fle	Make chec orida Depa	rtment of Si	tate
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Car Trust Fund (	mpaign Financing Contribution.		\$5.00 May Be Added to Fees	Figure 10 OFFIC	Make chec orida Depar ERS AND DI	RECTORS IN	tate
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  P FULLER, DENNIS R 536 NORTH MONROE STREET	9. Election Car Trust Fund (	mpaign Financing Contribution.  11.  TITLE NAME STREET ADDRESS		\$5.00 May Be Added to Fees ADDITIONS/CHA	Figure 10 OFFIC	Make chec orida Depar ERS AND DI	RECTORS IN	tate N 10
TO.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  P FULLER, DENNIS R 536 NORTH MONROE STREET	9. Election Car Trust Fund (	mpaign Financing Contribution.  11.  TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS		\$5.00 May Be Added to Fees ADDITIONS/CHA	Figure 10 OFFIC	Make chec orida Depar ERS AND DI	rtment of SI	tate N 10 Addition
TO.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  P FULLER, DENNIS R 536 NORTH MONROE STREET	9. Election Car Trust Fund (  IRECTORS  Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS		\$5.00 May Be Added to Fees ADDITIONS/CHA	Figure 10 OFFIC	Make chec orida Depar ERS AND DI	RECTORS IN Change  Change	V 10 Addition
TO.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND D  P FULLER, DENNIS R 536 NORTH MONROE STREET	9. Election Car Trust Fund (	TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS		\$5.00 May Be Added to Fees ADDITIONS/CHA	Figure 10 OFFIC	Make chec orida Depar ERS AND DI	rtment of Si IRECTORS IN  ☐ Change  ☐ Change	tate  J 10 Addition Addition

12. Thereby certify that the information supplied with this filling 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 place tike empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: \_\_

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #