

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2005 8:00 am
Secretary of State

03-04-2005 90099 047 ****61.25

DOCUMENT # N06313

1. Entity Name
**TIMBER RIDGE VILLAGE I CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business
**3240 CARDINAL DRIVE
SUITE 200
VERO BEACH, FL 32963 US**

Mailing Address
**3240 CARDINAL DRIVE
SUITE 200
VERO BEACH, FL 32963 US**

50022803



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01192005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2646231

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SCHLITT PROPERTY MANAGEMENT
3240 CARDINAL DRIVE
VERO BEACH, FL 32963**

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VP DIRECTOR** ☐ Delete **CHANGE**
NAME **ZEHNACKER, BOB**
STREET ADDRESS **723-A TIMBER RIDGE TRAIL**
CITY-ST-ZIP **VERO BEACH, FL 32962**

TITLE **PRESIDENT** ☐ Change ☒ Addition
NAME **GEORGE BURTON**
STREET ADDRESS **738 TIMBER RIDGE TRAIL**
CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE **T** ☐ Delete
NAME **GRAHAM, PETER**
STREET ADDRESS **737-C TIMBER RIDGE TRAIL**
CITY-ST-ZIP **VERO BEACH, FL 32962**

TITLE **VICE PRESIDENT** ☐ Change ☒ Addition
NAME **VICTOR MINOTTY**
STREET ADDRESS **737B TIMBER RIDGE TRAIL**
CITY-ST-ZIP **VERO BEACH, FL 32962**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition
NAME **BARBARA LEWIS**
STREET ADDRESS **739A TIMBER RIDGE TRAIL**
CITY-ST-ZIP **VERO BEACH, FL 32962**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4618 / **772-388-6752**