

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28943

FILED
Mar 30, 2009
Secretary of State

Entity Name: TIMBERLANE HOMEOWNERS ASSOCIATION OF P.B. COUNTY, INC.

Current Principal Place of Business:

3900 WOODLAKE BLVD
STE 309
LAKE WORTH, FL 33463 US

New Principal Place of Business:

Current Mailing Address:

3900 WOODLAKE BLVD
STE 309
LAKE WORTH, FL 33463 US

New Mailing Address:

FEI Number: 65-0154808 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILLEY, V. D
C/O HILLEY & WYANT-CORTEZ, P.A.
860 US HIGHWAY ONE, STE. 108
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

SIEGFRIED, RIVERA, LEARNER, ET.AL
201ALHAMBRA CIRCLE
1102
CORAL GABLES, FL 33134 US

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.

SIGNATURE: MARIA V. ARIAS

03/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ASTA, TOM
Address: 1402 TIMBERLANE CIRCLE
City-St-Zip: GREENACRES, FL 33463

Title: TD () Delete
Name: LUCENTI, CRISTINE
Address: 1701 TIMBERLANE CIRCLE
City-St-Zip: GREENACRES, FL 33463

Title: SD () Delete
Name: SCHLESSEL, MERLE
Address: 804 TIMBERLINE CIR
City-St-Zip: GREENACRES, FL 33463

Title: D () Delete
Name: CONOVER, SHERRI
Address: 2004 TIMBERLANE CIR
City-St-Zip: GREENACRES, FL 33463

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ASTA, TOM
Address: 1402 TIMBERLANE CIRCLE
City-St-Zip: GREENACRES, FL 33463

Title: PD (X) Change () Addition
Name: LUCENTI, CRISTINE
Address: 1701 TIMBERLANE CIRCLE
City-St-Zip: GREENACRES, FL 33463

Title: VPD (X) Change () Addition
Name: SCHLESSEL, MERLE
Address: 804 TIMBERLINE CIR
City-St-Zip: GREENACRES, FL 33463

Title: SD (X) Change () Addition
Name: HORNFIELD, NEAL
Address: 1203 TIMBERLANE CIRCLE
City-St-Zip: GREENACRES, FL 33463

Title: D () Change (X) Addition
Name: YOSELOWITZ, LINDA
Address: 1804 TIMBERLANE CIRCLE
City-St-Zip: GREENACRES, FL 33463

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTINE LUCENTI

PD

03/30/2009

Electronic Signature of Signing Officer or Director

Date