## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # TIMBER GREENS COMMUNITY ASSOCIATION, INC.

Principal Place of Business

SUITE 300,	3740	BEACH	BOULEVARD
JACKSONVILL	E, FI	LORIDA	32207

JACKSONVILLE, FLORIDA 32207			February 3, 1994							
	, 1201221. 0220	•				4. FEI Number 59-3238342			Applied For	-
		2a. Mailing Address 26 6333 TIMBER	GREE	 :NS	BLVD.	5. Certificate of Status Desired	M		75 Additional	-
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees				
City & State NEW PORT RIC	CHEY,FL	City & State 28 NEW PORT RICHEY, FL		,	7is this nonprofit corporation a homeowners association?  Yes  No					
Zip 34655	Country 25 USA	Zip 2934655	30 Co			· ·		_ ′	ar Intangible  No	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent				_				
				81		LIAM K. YORK				
4			9616 OAKWOOD HILLS COURT							
				63						
	Principal Place of Busines 6333 TIMBER Suite. Apt. #, etc.  City & State NEW PORT RIC Zip 34655	Principal Place of Business 6333 TIMBER GREENS BLVD. Suite. Apt. #, etc.  City & State NEW PORT RICHEY, FL Zip Country 34655 USA	6333 TIMBER GREENS BLVD.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  27  City & State  NEW PORT RICHEY, FL  Zip  Country  34655  28 NEW PORT RICHEY, FL  Zip  Country  29 4655	Principal Place of Business   2a. Mailing Address   6333 TIMBER GREENS BLVD.   26 6333 TIMBER GREENS BLVD.   26 6333 TIMBER GREENS BLVD.   27   27	Principal Place of Business 6333 TIMBER GREENS BLVD. 26 6333 TIMBER GREENS Suite, Apt. #, etc.  City & State NEW PORT RICHEY, FL Zip Country 34655 25 USA 28 Mailing Address Suite, Apt. #, etc.  27 City & State NEW PORT RICHEY, FL Zip Country 34655 25 USA 29 4655 30 US.  9. Name and Address of Current Registered Agent  81	Principal Place of Business 6333 TIMBER GREENS BLVD. 26 6333 TIMBER GREENS BLVD. Suite. Apt. #, etc.  City & State NEW PORT RICHEY, FL Zip Country 34655 25 USA 9. Name and Address of Current Registered Agent  2a. Mailing Address Suite Address City & State City & State 2b. NEW PORT RICHEY, FL Zip Country 34655 30 USA  9. Name and Address of Current Registered Agent  81 Name WILL 82 Street Addres 961	A. FEI Number 59-3238342  Principal Place of Business 6333 TIMBER GREENS BLVD. 26 6333 TIMBER GREENS BLVD.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State NEW PORT RICHEY, FL  Zip Country 34655 25 USA 26 NEW PORT RICHEY, FL  Zip Country 34655 30 USA  Personal Property Tax due June 9. Name and Address of Current Registered Agent  81 Name WILLIAM K. YORK 82 Street Address (PO. Box Number is Not Acceptate 9616 OAKWOOD HILLS COU.)	A. FEI Number 59-3238342  Principal Place of Business 6333 TIMBER GREENS BLVD. 26 6333 TIMBER GREENS BLVD.  Suite. Apt. #. etc.  Suite. Apt. #. etc.  City & State NEW PORT RICHEY, FL  Zip Country 34655 25 USA 26 Country 34655 30 USA  Personal Property Tax due June 30.  Name and Address of Current Registered Agent  10. Name and Address (PO. Box Number is Not Acceptable) 9616 OAKWOOD HILLS COURT	A. FEI Number 59-3238342  Principal Place of Business 6333 TIMBER GREENS BLVD. 26 6333 TIMBER GREENS BLVD. 5. Certificate of Status Desired 58.  Suite, Apt. #, etc. 6. Election Campaign Financing 75.  Trust Fund Contribution Add Contribution Ad	Applied For 59–3238342  4. FEI Number 59–3238342  Principal Place of Business 6333 TIMBER GREENS BLVD.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  NEW PORT RICHEY, FL  Zip  Country  34655  25 USA  26 HOSD  Address  Country  Zip  Country  38 NEW PORT RICHEY, FL  Zip  Country  39 H655  30 USA  Personal Property Tax due June 30.  Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  4. FEI Number 59–3238342  Applied For Not Applicable  Storet Address (PO. Box Number is Not Acceptable).

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE			RK PRESIDENT MARC I required when reinslating)  DATE  DATE	H 30, 1	998
40		<del></del>		UD DIDEOTO	DD 151 40
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	✓ □ DELETE	1.1 TITLE	P/D	Y Change	☐ Addition
NAME		1.2 NAME	WILLIAM K. YORK		
STREET ADDRESS		1.3 STREET ADDRESS	9616 OAKWOOD HILLS COURT		
CITY-ST-ZIP		1.4 CITY-ST-ZIP	NEW PORT RICHEY, FL 34655		
TITLE	☐ DELETE	2.1 TITLE	V/D	Change	Addition
NAME		2.2 NAME	WILLIAM DENEEN		
STREET ADDRESS		2.3 STREET ADDRESS	9301 CLEARMEADOW LANE		
CITY+ST-ZIP	<u>                                       </u>	2. 4 CITY - ST - ZIP	NEW PORT RICHEY, FL 34655		
TITLE	☐ DELETE	3.1 TITLE	S/D	Z Change	Addition
NAME		3.2 NAME	ILENE PEPER		
STREET ADDRESS		3.3 STREET ADORESS	9738 OAKWOOD HILLS COURT		
CITY-ST-ZIP		3.4. CITY - ST - ZIP	NEW PORT RICHEY, FL 34655		
TITLE	☐ DELETÉ	4.1 TITLE	D	Change	Addition
NAME	·	4 2 NAME	ARTHUR LUCIER		
STREET ADDRESS		4.3 STREET ADDRESS	5930 PECIOUS VIEW COURT		
CITY - ST - ZIP		4.4 CITY-ST-ZIP	NEW PORT RICHEY, FL 34655		
TITLE	☐ DELETE	5.1 TITLE	D	Change Change	Addition
NAME		5.2 NAME	LINDA FERNANDES	~	せて
STREET ADDRESS		5.3 STREET ADDRESS	9723 OAKWOOD HILLS COURT		177
CITY-ST-ZIP		5.4 CITY-ST-ZIP	NEW PORT RICHEY, FL 34655		413
TITLE	☐ DELETE	61 TITLE	T 200002479		A dition
NAME		6.2 NAME	ROBERT KANDERGALTIS01011-		
STREET ADDRESS		6.3 STREET ADDRESS	6547 PINE MARINE		i

14. 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 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 an antachment with an address.

6.4 CITY - ST - ZIP

**SIGNATURE:** 

WILLIAM K. YORK

MARCH 30,1998

NEW PORT RICHEY, FL 34655

813-372-2262

**FILED** 

Apr 03 1998 8:00am

Secretary of State

3. Date Incorporated or Qualified

NEW PORT RICHEY,

CR2E037 (10/97)