

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 30, 2004  
Secretary of State**

DOCUMENT# N94000004530

Entity Name: NEWBERRY HILLS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

22515 W. NEWBERRY RD  
NEWBERRY, FL 32669

**New Principal Place of Business:**

22515 W. NEWBERRY RD  
SUITE A  
NEWBERRY, FL 32669

**Current Mailing Address:**

22515 W. NEWBERRY RD  
NEWBERRY, FL 32669

**New Mailing Address:**

22515 W. NEWBERRY RD  
SUITE A  
NEWBERRY, FL 32669

FEI Number: 59-3270807      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MILLER, DAVID M  
22515 W. NEWBERRY RD STE A  
NEWBERRY, FL 32669      US

**Name and Address of New Registered Agent:**

TIMBROOK, KENNETH W  
22515 W. NEWBERRY RD  
SUITE A  
NEWBERRY, FL 32669 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: KENNETH TIMBROOK      04/30/2004  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: MILLER, DAVID M  
Address: 22515 W. NEWBERRY RD STE A  
City-St-Zip: NEWBERRY, FL 32669

Title: D      ( ) Delete  
Name: ANDES, JOSEPH P  
Address: 2723 NW 245 DR  
City-St-Zip: NEWBERRY, FL 32669

Title: D      ( ) Delete  
Name: BUCKLEY, BEVERLY  
Address: 2633 NW 244TH  
City-St-Zip: NEWBERRY, FL 32669

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D      (X) Change ( ) Addition  
Name: TIMBROOK, KENNETH M  
Address: 22515 W. NEWBERRY RD STE A  
City-St-Zip: NEWBERRY, FL 32669

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D      (X) Change ( ) Addition  
Name: PHELAN, GAYLE  
Address: 2633 NW 244TH  
City-St-Zip: NEWBERRY, FL 32669

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KENNETH TIMBROOK      D      04/30/2004  
Electronic Signature of Signing Officer or Director      Date