

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004652

FILED
Jan 27, 2006
Secretary of State

Entity Name: THE TIMBER RIDGE OF IMMOKALEE ASSOCIATION, INC.

Current Principal Place of Business:

2449 SANDERS PINES CIRCLE
IMMOKALEE, FL 34142 US

New Principal Place of Business:

Current Mailing Address:

2449 SANDERS PINES CIRCLE
IMMOKALEE, FL 34142 US

New Mailing Address:

FEI Number: 65-0748601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUEHNER, CARL J
900 BROAD ST, #2C
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

KUEHNER, CARL J
900 BROAD AVE S 2C
NAPLES, FL 34102 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:

01/27/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: KUEHNER, CARL
Address: 900 BROAD AVE S, 2-C
City-St-Zip: NAPLES, FL 34102

Title: TS () Delete
Name: NEWSOME, ROBERT
Address: 1302 NORTH 15TH STREET
City-St-Zip: IMMOKALEE, FL 33934

Title: D () Delete
Name: BLOODGOOD, JACK
Address: 788 ASHBURTON DRIVE
City-St-Zip: NAPLES, FL 34110

Title: VC () Delete
Name: KELLEHER, MAUREEN
Address: 1402 W. NEW MARKER RD
City-St-Zip: IMMOKALEE, FL 34142

Title: C (X) Delete
Name: PARKER, ALAN
Address: 741A THIRD STREET S
City-St-Zip: NAPLES, FL 34102

Title: D (X) Delete
Name: BELIVEAU, DARBY
Address: 565 ANCHOR RODE DR
City-St-Zip: NAPLES, FL 33940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: KUEHNER, CARL
Address: 900 BROAD AVE S 2C
City-St-Zip: NAPLES, FL 34102

Title: VC (X) Change () Addition
Name: PARKER, ALAN
Address: 741A THIRD ST S
City-St-Zip: NAPLES, FL 34102

Title: T (X) Change () Addition
Name: PROTO, FRANK
Address: 2125 SNOOK DR
City-St-Zip: NAPLES, FL 34102

Title: S (X) Change () Addition
Name: LANCASTER, HARRIET
Address: 3394 CERRITO CT
City-St-Zip: NAPLES, FL 34109

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CARL J. KUEHNER

C

01/27/2006

Electronic Signature of Signing Officer or Director

Date