FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 8:18

DOCUMENT # 742892 (3)

1. Corporation Name
THE TIMBERS HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
431 WAVERLY TALLAHASSEE FL 32312	431 WAVERLY TALLAHASSEE FL 32312

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/17/1978
3a. Date of Last Report: 04/29/1994
4. FEI Number: 59-2027146 ☐ Applied For ☐ Not Applicable
2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) County (25) Zip (29) County (30)
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ISAACS, DAN L
431 WAVERLY
TALLAHASSEE FL 32312

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	STD	11 TITLE		☐ Change ☐ Addition
NAME	JOHNNY JOHNSON	12 NAME		
STREET ADDRESS	2321 C MISSION ROAD	13 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL	14 CITY-ST-ZIP		
TITLE	~~D~~	21 TITLE	Dir	☒ Change ☐ Addition
NAME	~~SANDERS, CAREY~~	22 NAME	Harris, Jerry	
STREET ADDRESS	~~2321-A MISSION ROAD~~	23 STREET ADDRESS	2925 Ivanhoe	
CITY-ST-ZIP	~~TALLAHASSEE FL~~	24 CITY-ST-ZIP	Tallahassee, FL 32312	
TITLE	P	31 TITLE		☐ Change ☐ Addition
NAME	CHERRY, GARY	32 NAME		
STREET ADDRESS	9036 MUIRFIELD COURT	33 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL	34 CITY-ST-ZIP		
TITLE	D	41 TITLE		☐ Change ☐ Addition
NAME	INGLE, ANN	42 NAME		
STREET ADDRESS	2311 MIRANDA	43 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL 32304	44 CITY-ST-ZIP		
TITLE	~~D~~	51 TITLE	Treas + Dir	☒ Change ☐ Addition
NAME	~~BROOKS, FRANK "PETE"~~	52 NAME	Burns, Cheryl	
STREET ADDRESS	~~799 TIMBERWAY COURT~~	53 STREET ADDRESS	793 Timberwood Circle	
CITY-ST-ZIP	~~TALLAHASSEE FL~~	54 CITY-ST-ZIP	Tallahassee FL 32304	
TITLE	~~D~~	61 TITLE	Dir	☐ Change ☐ Addition
NAME	~~HRELL, RON C.~~	62 NAME	Morlett, David	
STREET ADDRESS	~~P.O. BOX 20862 N/A~~	63 STREET ADDRESS	2220 Timberwood Circle S.	
CITY-ST-ZIP	~~TALLAHASSEE FL 32300~~	64 CITY-ST-ZIP	Tallahassee FL 32304	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 on an attachment with an address.

SIGNATURE: _____ 4/28/95 (904) 668-7993
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER OR DIRECTOR — Date — Daytime Phone #
JESSE GARY CHERRY, JR.

0002300