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Feb 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # **723806** **(6)**

1. Corporation Name

TYMBER SKAN ON THE LAKE OWNERS ASSOCIATION, SECT ION ONE, INC.

Principal Place of Business	Mailing Address
4028 TYMBERWOOD LN ORLANDO FL 32839 US	4028 TYMERWOOD LN ORLANDO FL 32839 US

3. Date Incorporated or Qualified: 07/05/1972

4. FEI Number: 59-1416215 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 4041 Tymberwood Ln.	26 4041 Tymberwood Ln.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Orlando, Florida	City & State 28 Orlando, Florida
Zip / Country 24 32839 / 25 U.S.A.	Zip / Country 29 32839 / 30 U.S.A.

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. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

PLATIN, MAGDALENA
4028 TYMBERWOOD LN
ORLANDO FL 32839

10. Name and Address of New Registered Agent

81 Name: BECKER & POLIAKOFF, P.A.
82 Street Address (P.O. Box Number is Not Acceptable): c/o C. JOHN CHRISTENSEN, ESQ.
83: 500 Winderley Place, Suite 104
84 City: Maitland **FL** 85 Zip Code: 32751

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: C. John Christensen for Becker & Poliakoff, P.A. DATE: 2/3/98
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	VP	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	VANIS, R. T		1.2 NAME		
STREET ADDRESS	7640 CLUBHOUSE ESTATES DR.		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP		
TITLE	ST	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	VAZQUEZ, JOSE		2.2 NAME		
STREET ADDRESS	316 51 STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	BROOKLYN NY		2.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	AUGUSTINE, DENNIS A.		3.2 NAME		
STREET ADDRESS	2632 SKAN CT		3.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	TELLEZ, NOHEMI		4.2 NAME		
STREET ADDRESS	4288 GREENPOCKET LN		4.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	LOMBARDI, ALICE		5.2 NAME		
STREET ADDRESS	41159 WINDCROSS LANE		5.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	LARGER, JOHN		6.2 NAME		
STREET ADDRESS	5136 CR 478		6.3 STREET ADDRESS		
CITY-ST-ZIP	WEBSTER FL		6.4 CITY-ST-ZIP		

CR2E037 (10/97)

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 on an attachment with an address.

SIGNATURE: R.T. Vanis Vicepresident 1/26/98 407-841 6999