## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1998

**CHERRY, GARY** 

TALLAHASSEE FL

WALLACE, HEATHER

2319A MISSION RD

TALLAHASSEE FL

WAAS, HARRIE H.

3797 SALLY LANE

TALLAHASSEE FL

MARLETT, D AVID

2220 TIMBERWOOD CIRCLE S

9036 MUIRFIELD COURT

32512

DELETE

DELETE

DELETE

NAME

TITLE

NAME

TITI F

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY - ST - ZIP

CITY-ST-ZIP



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

THE TIMBERS HOMEOWNERS' ASSOCIATION, INC.

## Principal Place of Business Mailing Address 431 WAVERLY 431 WAVERLY 3. Date Incorporated or Qualified TALLAHASSEE FL 32312 TALLAHASSEE FL 32312 05/17/1978 4. FEI Number Applied For 59-2027146 Not Applicable 2. Principal Place of Business Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 Trust Fund Contribution Added to Fees 27 City & State City & State 7. Is this nonprofit corporation a homeowners association? ☐ No 23 Yes 26 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ISAACS, DAN L 82 Street Address (P.O. Box Number is Not Acceptable) 431 WAVERLY TALLAHASSEE FL 32312 83 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change \_\_\_ Addition TITLE 1.1 TITLE WALLACE, HEATHER NAME 1,2 NAME 2319-A MISSION RD STREET ADDRESS 1.3 STREET ADDRESS TALLAHASSEE FL 32304 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE Joseph R. hona LOWE, WALTER 2 2 NAME NAME 2186 TIMBERWOOD CIRCLE N. STREET ADDRESS 2.3 STREET ADDRESS TALLAHASSEE FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 3.1 TITLE 300002518755 TITLE

TALLAHASSEE FL 3236 Y 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fior da 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 officer or director of the corporation of the receiver or trustee empowered to Block 12 or Block 13 if changed, or on an attachment with an address.

3.2 NAME

4.1 TITLE

4. 2 NAME

SITITLE

52 NAME

6.1 TITLE

6.2 NAME

**3.3 STREET ADDRESS** 

4.3 STREET ADDRESS

5.3 STREET ADDRESS

**6.3 STREET ADDRESS** 

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

**SIGNATURE** 

FILED

May 11 1998 8:00am

Secretary of State

-05/11/98--01085--021

2230 Timberwood Circle North

Marianne Royals

2251-A Mission Road

Change

Addition