

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 10, 2006 8:00 am
Secretary of State

03-10-2006 90007 007 ****61.25

DOCUMENT # N15607



1. Entity Name

TIMBERLINE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

**C/O INFINITI PROPERTY MANAGEMENT, INC
1301 SEMINOLE BLVD. SUITE 110
LARGO FL 33770
US**

Mailing Address

**C/O INFINITI PROPERTY MANAGEMENT, INC
1301 SEMINOLE BLVD. SUITE 110
LARGO FL 33770
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2847376

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

5. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**INFINITI PROPERTY MANAGEMENT, INC.
1301 SEMINOLE BLVD STE 110
LARGO FL 33770**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature: Typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	DOTY, ROGER	
STREET ADDRESS	1940 ELAINE DR	
CITY- ST- ZIP	CLEARWATER FL 33760	

TITLE	STD	<input checked="" type="checkbox"/> Delete
NAME	WHEATLY, DENISE	
STREET ADDRESS	1900 ELAINE DR	
CITY- ST- ZIP	CLEARWATER FL 33760	

TITLE	VD	<input type="checkbox"/> Delete
NAME	HEIL, LISA	
STREET ADDRESS	1944 ELAINE DR	
CITY- ST- ZIP	CLEARWATER FL 33760	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE	S/T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DEWS, JOHN	
STREET ADDRESS	1966 ELAINE DR	
CITY- ST- ZIP	CLEARWATER FL 33760	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Roger Doty

Roger Doty

2/27/06

(727) 524-3188