

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730076

FILED
Feb 27, 2009
Secretary of State

Entity Name: TYMBER SKAN ON THE LAKE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2650 SKAN CT
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

2650 SKAN CT
ORLANDO, FL 32839

New Mailing Address:

FEI Number: 59-1629556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KILLGORE PEARLMAN STAMP ORNSTEIN & SQUIRES
2 SOUTH ORNAGE AVE., 5TH FLOOR
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RADICE, EUGENE
Address: 2273 BLUE SAPPHIRE ICR.
City-St-Zip: ORLANDO, FL 32837

Title: S () Delete
Name: HURLEY, JAMES
Address: 3085 FLORAL WAY EAST
City-St-Zip: APOPKA, FL 32703

Title: T () Delete
Name: VAZQUEZ, JOSE
Address: 4618 GREEN GLEN CT.
City-St-Zip: ORLANDO, FL 32839

Title: VP (X) Delete
Name: TIEDEMAN, JEANNE N
Address: 4407 TYMBERWOOD LN.
City-St-Zip: ORLANDO, FL 32839

Title: P () Delete
Name: SECAN, AMANDA
Address: 1480 NEPTUNE RD
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: AMANDA SECAN

P

02/27/2009

Electronic Signature of Signing Officer or Director

Date