2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37208

FILED Apr 10, 2012 Secretary of State

Entity Name: TYMBER TRACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

TYMBER TRACE 1361 WAYNE AVE

NEW SMYRNA BEACH, FL 32168 US

Current Mailing Address: New Mailing Address:

P.O. BOX 906 TYMBER TRACE NEW SMYRNA BEACH, FL 32170 US PO BOX 906

NEW SMYRNA BEACH, FL 32170

FEI Number: 59-2999239 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOMAN, THOMAS E 1361 WAYNE AVE

NEW SMYRNA BEACH, FL 32168 US

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: TD

Name: HOMAN, THOMAS E Address: 1361 WAYNE AVE

City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: SD

 Name:
 SIMMONDS, HEATHER

 Address:
 685 ROCHESTER COURT

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32168

Title: VD

 Name:
 DUCKWORTH, ROBERT

 Address:
 657 WELLESLEY COURT

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32168

Title: PD

Name: GERLACH, BILL

Address: 653 WELLESLEY COURT

City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VD

Name: STANIEICH, RUTH
Address: 615 MIDDLEBURY LOOP
City-St-Zip: NEW SMYRNA BEACH, FL 32168

I hereby 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 all other like empowered.

SIGNATURE: THOMAS E HOMAN TD 04/10/2012