

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 742892

FILED
Apr 28, 2003
Secretary of State

Entity Name: THE TIMBERS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

THE TIMBERS HOMEOWNER
431 WAVERLY
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

431 WAVERLY
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 59-2027146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISAACS, DAN L
431 WAVERLY
TALLAHASSEE, FL 32312 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: MAHER, RICHARD
Address: 784 TIMBERWOOD CIR EAST
City-St-Zip: TALLAHASSEE, FL 32304

Title: DP () Delete
Name: LONG, JOSEPH R
Address: 1911 SUNSET LANE
City-St-Zip: TALLAHASSEE, FL 32303

Title: DT () Delete
Name: CHERRY, JESSE G
Address: 9036 MUIRFIELD COURT
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: ROYALS, MARIANNE
Address: 2251-A MISSION RD.
City-St-Zip: TALLAHASSEE, FL 32304

Title: DS () Delete
Name: WILSON, SHAWN
Address: 2217 TIMBERWOOD CIRCLE NORTH
City-St-Zip: TALLAHASSEE, FL 32304

Title: D () Delete
Name: RODDENBERRY, SAM
Address: 3376 E. LAKESHORE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change () Addition
Name: LEGATE, MIKE
Address: 3228 STORRINGTON DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

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: D (X) Change () Addition
Name: WILSON, SHAWN
Address: 2217 TIMBERWOOD CIRCLE NORTH
City-St-Zip: TALLAHASSEE, FL 32304

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GARY CHERRY

TREA

04/28/2003

Electronic Signature of Signing Officer or Director

Date