

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000011255

**FILED**  
**Apr 17, 2023**  
**Secretary of State**  
**6392975295CC**

**Entity Name:** TIMBER RUN CONDOMINIUM ASOCIATION, INC.

**Current Principal Place of Business:**

7400 BAYMEADOWS WAY  
SUITE 317  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

7400 BAYMEADOWS WAY  
SUITE 317  
JACKSONVILLE, FL 32256 US

**FEI Number:** 20-3749266

**Certificate of Status Desired:** No

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

ASSOCIA CMC OF JACKSONVILLE  
7400 BAYMEADOWS WAY  
SUITE 317  
JACKSONVILLE, FL 32256 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:** MICHELLE GRIGGS

04/17/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SMITH, LILLIAN  
Address        7400 BAYMEADOWS WAY  
                  SUITE 317  
City-State-Zip: JACKSONVILLE FL 32256

Title            VP, TREASURER  
Name            BROCK, MICHELLE  
Address        7400 BAYMEADOWS WAY  
                  SUITE 317  
City-State-Zip: JACKSONVILLE FL 32256

Title            TREASURER  
Name            CRISWELL, GARY  
Address        7400 BAYMEADOWS WAY  
                  SUITE 317  
City-State-Zip: JACKSONVILLE FL 32256

*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:** LILLIAN SMITH

**PRESIDENT**

04/17/2023

Electronic Signature of Signing Officer/Director Detail

Date