

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20350

Entity Name: TIMBERLANE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**2628 W SUNRISE ST
LECANTO, FL 34461**Current Mailing Address:**PO BOX 640305
BEVERLY HILLS, FL 34465 US**FEI Number:** 59-2794275**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**DECARMINE, PAT PRES
2628 W SUNRISE ST
LECANTO, FL 34461 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:** PAT DECARMINE

02/25/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRES
Name	DECARMINE, PAT
Address	2628 W SUNRISE ST
City-State-Zip:	LECANTO FL 34461

Title	1VP, VP
Name	FLOWERS, JOSEPH
Address	2657 W SUNRISE ST
City-State-Zip:	LECANTO FL 34461

Title	2VP, VP
Name	WATSON, SABRINA
Address	1062 N RABECK AVE
City-State-Zip:	LECANTO FL 34461

Title	TRES
Name	NEMMERS, JOSEPHINE
Address	1390 LOMBARDO AVE
City-State-Zip:	LECANTO FL 34461

Title	SEC
Name	FITZHORN, LORRENE
Address	1390 N LOMBARDO AVE
City-State-Zip:	LECANTO FL 34461

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: JOSEPHINE NEMMERS**TREASURER**

02/25/2019

Electronic Signature of Signing Officer/Director Detail

Date