

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28943

FILED
Feb 24, 2015
Secretary of State
CC8072913003

Entity Name: TIMBERLANE HOMEOWNERS ASSOCIATION OF P.B. COUNTY, INC.

Current Principal Place of Business:

C/O QUALITY MANAGEMENT GROUP, INC
2200 TIMBERLANE CR
GREENACRES, FL 33463

Current Mailing Address:

C/O QUALITY MANAGEMENT GROUP, INC
9045 LA FONTANA BLVD. SUITE101
BOCA RATON, FL 33434 US

FEI Number: 65-0154808

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAKALAR AND ASSOCIATES, P.A.
150 S PINE ISLAND ROAD
SUITE 540
PLANTATION, FL 33324 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: MICHAEL BAKALAR

02/24/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SUAREZ, WALLY
Address C/O QUALITY MANAGEMENT GROUP,
 INC
 9045 LA FONTANA BLVD. SUITE101
City-State-Zip: BOCA RATON FL 33434

Title VP
Name VILLA, RENO
Address C/O QUALITY MANAGEMENT GROUP,
 INC
 9045 LA FONTANA BLVD. SUITE101
City-State-Zip: BOCA RATON FL 33434

Title SECRETARY
Name GARGANO, PAUL
Address C/O QUALITY MANAGEMENT GROUP,
 INC
 9045 LA FONTANA BLVD. SUITE101
City-State-Zip: BOCA RATON FL 33434

Title TREASURER
Name BENTLEY, NANCY
Address C/O QUALITY MANAGEMENT GROUP,
 INC
 9045 LA FONTANA BLVD. SUITE101
City-State-Zip: BOCA RATON FL 33434

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: WALLY SUAREZ

PRESIDENT

02/24/2015

Electronic Signature of Signing Officer/Director Detail

Date