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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham,
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 678257 (7)

1. Corporation Name

TIMBER RIDGE, INC.



Principal Place of Business

700 TIMBER RIDGE TRAIL
VERO BEACH FL 32962

Mailing Address

700 TIMBER RIDGE TRAIL
VERO BEACH FL 32962

3. Date Incorporated or Qualified

07/14/1980

3a. Date of Last Report

01/18/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MUSTAPICK, ANDREW J.
700 TIMBER RIDGE TRAIL
VERO BEACH FL 32962

81 Name

Marilyn Mustapick

82 Street Address (P.O. Box Number is Not Acceptable)

700 Timber Ridge Trail

83

84 City

Vero Beach

FL

85 Zip Code

32962

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Marilyn Mustapick
Signature (Typed or printed name of signatory follows)

Marilyn Mustapick
Signature (Typed or printed name of signatory follows)

3-13-96
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	☒ DELETE
NAME	MUSTAPICK, ANDREW J.	
STREET ADDRESS	700 TIMBER RIDGE TRAIL	
CITY-STATE-ZIP	VERO BEACH FL	
TITLE	VD	☐ DELETE
NAME	MUSTAPICK, MARILYN	
STREET ADDRESS	700 TIMBER RIDGE TRAIL	
CITY-STATE-ZIP	VERO BEACH FL	
TITLE	S	☐ DELETE
NAME	JONES, SUSAN V.	
STREET ADDRESS	700 TIMBER RIDGE TRAIL	
CITY-STATE-ZIP	VERO BEACH FL	
TITLE	VT	☒ DELETE
NAME	MUSTAPICK, ANDREW M.	
STREET ADDRESS	700 TIMBER RIDGE TRAIL	
CITY-STATE-ZIP	VERO BEACH FL	
TITLE	V	☒ DELETE
NAME	MUSTAPICK, MATTHEW	
STREET ADDRESS	700 TIMBER RIDGE TRAIL	
CITY-STATE-ZIP	VERO BEACH FL	
TITLE	VD	☒ DELETE
NAME	MUSTAPICK, MARK	
STREET ADDRESS	700 TIMBER RIDGE TRAIL	
CITY-STATE-ZIP	VERO BEACH FL	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	PRESIDENT / DIRECTOR ☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	SECRETARY / TREASURER / DIRECTOR ☒ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Susan V Jones SUSAN V JONES
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/96
DATE

407/569-5780
TELEPHONE NUMBER

CR2E034 (12/95)