FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

723806

(6)

TYMBER SKAN ON THE LAKE OWNERS ASSOCIATION, SECTION ONE, INC.

Principal Plac	e of Business	Mailing Address 4028 TYMERWOOD LN ORLANDO FL 32839 US				
4028 TYMBERV ORLANDO FL :				3. Date Incorporated or Qualified 07/05/1972		
03		ψa			4. FEI Number	Applied For
					59-1416215	Not Applicable
2. Principal P 21 4041		1 Tymberwood Ln.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Sufte, Apt. #, etc. Sulte, Apt. #, etc. 27					6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & Stat		City & State			7. Is this nonprofit corporation a homeowners association?	
	do, Florida	28 Orlando, Florida		Yes 🔀 No		
Zip	Country	Zip 29 32839	Country U.S.	7.	8. This corporation owes or has paid the c	
24 32839	9. Name and Address of Current		30 U.S.		Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
	y. Name and Address of Current	negistered Agent	81	Name pro		a Agent
<u> </u>				BECKER & POLIAKOFF, P.A.		
PŁATNIK MAGDALENA				82 Street Address (P.O. Box Number is Not Acceptable)		
9928-TYMBERWOODEN					C. JOHN CHRISTENSEN, ES	
GRIANDQ Fix38839			63		Winderley Place, Suite	104
					tland F	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.						
agent. I am tamiliar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE () SI						
12.	Signature, typied or printed harne of registered agent OFFICERS AND		13.	aignature required	ADDITIONS/CHANGES TO OFFICERS AN	JD DIRECTORS IN 12
TITLE	VP OFFICE AND	DELETE	1.1 TITLE		TIBOTHOTOTOTOTOTOTOTOTOTOTOTOTOTOTOTOTOTOT	Change Addition
NAME	VANIS, R. T		1,2 NAME	1		I
STREET ADDRESS	7640 CLUBHOUSE ESTATES D	R.	1.3 STREET AD	DRESS		
CITY-ST-ZIP	ORLANDO FL		1.4 CITY - ST - 2	ZIP		ĺ
TITLE	ST DELETE		21 TITLE			Change Addition
NAME	VAZQUEZ, JOSE		2.2 NAME	2.2 NAME		
STREET ADDRESS	316 51 STREET		2.3 STREET AD	ORESS)		J
CITY-ST-ZIP	BROOKLYN NY		2. 4 CITY - ST -	ZIP		
TITLE	PD	☐ DELETE	3.1 TITLE			Change Addition
NAME	AUGUSTINE, DENNIS A.		3.2 NAME	J		ļ
STREET ADDRESS	2632 SKAN CT		3.3 STREET AD	Dress		
CITY-ST-ZIP	ORLANDO FL		3.4. CITY-ST-	ZIP		
TITLE	D	DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME	TELLEZ, NOHEMI		4.2 NAME			
STREET ADDRESS	4288 GREENPOCKET LN		4.3 STREET AD			
CITY-ST-ZIP	ORLANDO FL	T prime	4.4 CITY - ST - Z	ZIP		
TITLE	D A DOMBARDO AL LOS	☐ DELETE	5.1 TITLE			Change Addition
NAME	LOMBARDI, ALICE		5.2 NAME			į
STREET ADDRESS	41159 WINDCROSS LANE		5.3 STREET AD			
CITY-ST-ZIP	ORLANDO FL	DELETE	5.4 C(TY-ST-Z	tiP		Change Addition
TITLE	D	TT DEFEIF	6.1 TITLE	į		Change Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

LARGER, JOHN

5136 CR 478

WEBSTER FL

Vanis Vicepresident

1/26/98 407-841 6999

FILED

Feb 10 1998 8:00am

Secretary of State

R2E037 (10/97)