2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2012
Secretary of State

DOCUMENT# 727624

Entity Name: TIMBER OAKS COMMUNITY SERVICES ASSOCIATION, INC.

Current Principal Place of Business:

8425 PONDEROSA AVENUE
PORT RICHEY, FL 34668

New Principal Place of Business:

Current Mailing Address:

8425 PONDEROSA AVENUE
PORT RICHEY, FL 34668

New Mailing Address:

FEI Number: 23-7451232 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS, INC.
4585 140TH AVE. NORTH SUITE 1012
CLEARWATER, FL 33762 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: VP
Name: GALLAGHER, GERALD
Address: 10624 TIMBER LANE
City-St-Zip: PORT RICHEY, FL 34668

Title: D
Name: LICHTER, ROBERT
Address: 10960 PEPPERTREE LN
City-St-Zip: PORT RICHEY, FL 34668

Title: S
Name: WYZLIC, PATRICIA
Address: 11030 ROLLINGWOOD DR.
City-St-Zip: PORT RICHEY, FL 34668

Title: T
Name: MERCER, LOIS
Address: 10827 LOS SANTOS DR
City-St-Zip: PORT RICHEY, FL 34668

Title: D
Name: ORCHARD, RON
Address: 10659 FALLEN LEAF LN
City-St-Zip: PORT RICHEY, FL 34668

Title: P
Name: ANDERSON, BERT
Address: 8121 CASUARINA DR.
City-St-Zip: PORT RICHEY, FL 34668

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: BERT ANDERSON PD 03/20/2012

Electronic Signature of Signing Officer or Director — Date