2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 729320

1. Entity Name

TIMBER OAKS FAIRWAY VILLAS CONDOMINIUM I ASSOCIA

FILED
Apr 04, 2000 8:00 am
Secretary of State
04-04-2000 90094 045 ****61.25

Principal Place of Business	Mailing Address
10730 US 19. STE 17 PORT RICHEY FL 34668	10730 US 19. STE 17 PORT RICHEY FL 34668-2863

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1590614 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
QUALIFIED PROPERTY MANAGEMENT, INC. 10730 US 19, STE 17 PORT RICHEY FL 34668	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

MAR 22 2000
EFFECTIVE

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD KAMINSKI, JOSEPH 11130-5 CARRIAGE HILL DR PORT RICHEY, FL 0	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD VITALE, MURIEL 11211-6 CARRIAGE HILL PORT RICHEY, FL 00000	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~D~~ ~~ZACH, DONALD~~ ~~11210-3 CARRIAGE HILL DR.~~ ~~PORT RICHEY FL 34668~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition VD Mensch, Tim 11130-4 Carriage Hill Dr. Port Richey, FL
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~D~~ ~~THOMAS, HOWARD~~ ~~8220-6 SEVEN OAKS COURT~~ ~~PORT RICHEY FL~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition D Mensch, Reg 11211-5 Carriage Hill Dr. Port Richey, FL
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MURPHY, DANIEL 11117-3 PEMBRIDGE CT PORT RICHEY FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/99)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Marcial Vitale JR/Del V. VITALE 3/28/00 727-869-9700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #