

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736764

FILED  
Apr 10, 2012  
Secretary of State

**Entity Name:** TYMBER CREEK HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

376 TYMBER RUN  
ORMOND BEACH, FL 32174 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 730085  
ORMOND BCH, FL 321730085 US

**New Mailing Address:**

POST OFFICE BOX 730085  
ORMOND BCH, FL 32173

**FEI Number:** 59-1835729

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ATTORNEY CHARLES DAVID HOOD JR.  
444 SEABREEZE BLVD  
DAYTONA BEACH, FL 32118 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: PD  
Name: WARD, SHERRY  
Address: POST OFFICE BOX 730085  
City-St-Zip: ORMOND BCH, FL 3217

Title: SD  
Name: COLLINS, JAN  
Address: POST OFFICE BOX 730085  
City-St-Zip: ORMOND BEACH, FL 32173

Title: VPD  
Name: BUCKWALD, SCOTT  
Address: POST OFFICE BOX 730085  
City-St-Zip: ORMOND BEACH, FL 32173

Title: TD  
Name: WHITTIN, AMANDA  
Address: POST OFFICE BOX 730085  
City-St-Zip: ORMOND BEACH, FL 32173

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: SHERRY WARD

PD

04/10/2012

Electronic Signature of Signing Officer or Director

Date