

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR 21 PM 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 743336 (0)

1. Corporation Name

TIMBERCREEK TOWNHOMES & VILLAS HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business

100 SPARROW DR
ROYAL PALM BCH FL 33411

Mailing Address

100 SPARROW DR
ROYAL PALM BCH FL 33411

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/20/1978

3a. Date of Last Report

05/01/1994

4. FBI Number

59-2237570

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BOSTWICK, FRANK A.
100-15 SPARROW DRIVE R.P.B.
ROYAL PALM BEACH FL 33411-8617

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME BELL, JOHN
STREET ADDRESS 100-20 SPARROW DR.
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

1.1 TITLE
1.2 NAME Bell, Kathy
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☒ Change ☐ Addition

TITLE TD
NAME HOLLAND, EDWARD
STREET ADDRESS 100-7 SPARROW DRIVE
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE SD
NAME BOSTWICK, FRANK
STREET ADDRESS 100-15 SPARROW DRIVE
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE PD
NAME SANTAMARIA, JESS
STREET ADDRESS 155 GALLIANO STREET
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

4.1 TITLE D
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☒ Change ☐ Addition

TITLE D
NAME PARKER, JENIFER
STREET ADDRESS 100-9 SPARROW DR
CITY-ST-ZIP ROYAL PALM BCH FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Edward Holland

3/15/95

407-689-4093

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #