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**FILED**  
**Apr 29, 1999 8:00 am**  
**Secretary of State**

04-29-1999 90259 049 \*\*\*\*61.25

NONPROFIT  
 CORPORATION  
 ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # 743336**

1. Corporation Name

**TIMBERCREEK TOWNHOMES & VILLAS HOMEOWNER'S ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

100 SPARROW DR  
 ROYAL PALM BCH FL 33411

100 SPARROW DR  
 ROYAL PALM BCH FL 33411



451336-90259-49



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

06/20/1978

22 City & State

27 City & State

4. FEI Number  
**59-2237570**

Applied For  
 Not Applicable

23 Zip Country

28 Zip Country

5. Certificate of Status Desired

**\$8.75** Additional  
 Fes Required

24 Zip Country

29 Zip Country

6. Election Campaign Financing  
 Trust Fund Contribution

**\$5.00** May Be  
 Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BELL, KATHY M.**  
**100 SPARROW DRIVE**  
**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 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.

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 **P**  DELETE  
 NAME **BELL, KATHY**  
 STREET ADDRESS **100-20 SPARROW DR.**  
 CITY-ST-ZIP **ROYAL PALM BEACH FL**

1.1 TITLE **D**  Change  Addition  
 1.2 NAME **Andrew S. Markley**  
 1.3 STREET ADDRESS **3120 Sandhurst Drive**  
 1.4 CITY-ST-ZIP **Woodstock, GA 30189**

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

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

TITLE **D**  DELETE  
 NAME **SANTAMARIA, JESS**  
 STREET ADDRESS **155 GALIANO STREET**  
 CITY-ST-ZIP **ROYAL PALM BEACH FL**

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

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

4.1 TITLE **PD**  Change  Addition  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

5.1 TITLE **SD**  Change  Addition  
 5.2 NAME **Jacqueline Millsbaugh**  
 5.3 STREET ADDRESS **100-10 Sparrow Drive**  
 5.4 CITY-ST-ZIP **Royal Palm Beach, FL 33411**

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

6.1 TITLE **VD**  Change  Addition  
 6.2 NAME **Paul LaFleur**  
 6.3 STREET ADDRESS **100-1 Sparrow Drive**  
 6.4 CITY-ST-ZIP **Royal Palm Beach, FL 33411**

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, with all other like empowered.

SIGNATURE: *Edward Holland* **Edward Holland** 4/22/99 561-790-0118  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (1/198)