

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743649

FILED  
Aug 18, 2009  
Secretary of State

**Entity Name:** TIMUQUANA VILLAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4358 TIMUQUANA ROAD  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

4358 TIMUQUANA ROAD  
JACKSONVILLE, FL 32210

**New Mailing Address:**

3015 HARTLEY RD  
JACKSONVILLE, FL 32257

**FEI Number:** 59-1930370      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ELLER, JOAN  
4435 MILAM ROAD  
JACKSONVILLE, FL 32210      US

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

STELLAR PROPERTIES OF NORTH FLORIDA  
3015 HARTLEY RD  
JACKSONVILLE, FL 32257      US

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: PAULA MCDANIEL

08/18/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T      ( ) Delete  
Name: BLAYLOCK, JOAN  
Address: 4358 TIMUQUANA RD., #172  
City-St-Zip: JACKSONVILLE, FL 32210

Title: S      ( ) Delete  
Name: HARTRIDGE, DOTTIE  
Address: 1358 TIMUQUANA RD #190  
City-St-Zip: JACKSONVILLE, FL 32210

Title: V      ( ) Delete  
Name: FAUBION, CHARLES  
Address: 2175 MAE ST  
City-St-Zip: WAYCROSS, GA 31501

Title: P      ( ) Delete  
Name: BREESE, WILLIAM  
Address: 4358 TIMUQUANA ROAD, #146  
City-St-Zip: JACKSONVILLE, FL 32210

Title: M      ( ) Delete  
Name: ELLER, JOAN  
Address: 4435 MILAM ROAD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D      ( ) Delete  
Name: UTSEY, SISTER  
Address: 4358 TIMUQUANA RD #152  
City-St-Zip: JACKSONVILLE, FL 32210

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      (X) Change ( ) Addition  
Name: FAUBION, CHARLES  
Address: 4358 TIMUQUANA RD #121  
City-St-Zip: JACKSONVILLE, FL 32210

Title: T      (X) Change ( ) Addition  
Name: HAMMOCK, WILLIAM  
Address: 4358 TIMUQUANA RD #207  
City-St-Zip: JACKSONVILLE, FL 32210

Title: S      (X) Change ( ) Addition  
Name: EBERLY, ALISON  
Address: 4358 TIMUQUANA RD #148  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D      (X) Change ( ) Addition  
Name: HARTRIDGE, DOROTHY  
Address: 4358 TIMUQUANA ROAD, #190  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D      (X) Change ( ) Addition  
Name: DIMMICK, OLETA  
Address: 4358 TIMUQUANA RD #124  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D      (X) Change ( ) Addition  
Name: BASFORD, MATT  
Address: 4358 TIMUQUANA RD #134  
City-St-Zip: JACKSONVILLE, FL 32210

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WILLIAM HAMMOCK

T

08/18/2009

Electronic Signature of Signing Officer or Director

Date