## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 743649** 

FILED Feb 15, 2011 Secretary of State

Entity Name: TIMUQUANA VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4358 TIMUQUANA ROAD JACKSONVILLE, FL 32210

Current Mailing Address: New Mailing Address:

4358 TIMUQUANA ROAD JACKSONVILLE, FL 32210

FEI Number: 59-1930370 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HAMMOCK, LINDA C TREASUR 4358 TIMUQUANA RD #207 JACKSONVILLE, FL 32210 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: VP

Name: HARTRIDGE, DOROTHY
Address: 4358 TIMUQUANA RD #190
City-St-Zip: JACKSONVILLE, FL 32210

Title: T

Name: HAMMOCK, LINDA Address: 4358 TIMUQUANA ROAD, #207

City-St-Zip: JACKSONVILLE, FL 32210

Title: S

Name: MCCORMICK, MARGARET Address: 4358 TIMUQUANA RD #185 City-St-Zip: JACKSONVILLE, FL 32210

Title: F

Name: BREESE, WILLIAM

Address: 4358 TIMUQUANA ROAD #146 City-St-Zip: JACKSONVILLE, FL 32210

Title:

 Name:
 PINKERTON, MILDRED

 Address:
 4358 TIMUQUANA RD #147

 City-St-Zip:
 JACKSONVILLE, FL 32210

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: LINDA HAMMOCK TREA 02/15/2011