

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746159

FILED  
Mar 17, 2010  
Secretary of State

**Entity Name:** THE TIMBERS OF BOCA HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O HAWK-EYE MANAGEMENT INC.  
3901 N. FEDERAL HWY., STE 202  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

C/O HAWK-EYE MANAGEMENT INC.  
3901 N. FEDERAL HWY., STE 202  
BOCA RATON, FL 33431

**New Mailing Address:**

**FEI Number:** 59-2144545

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PATTI, PAUL N.  
% HAWK-EYE MANAGEMENT INC.  
3901 N. FEDERAL HWY., STE 202  
BOCA RATON, FL 33431 US

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

GAGLIANO, KAREN A  
955-N NORTHWEST 17TH AVE  
DELRAY BEACH, FL 33445 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: KAREN A. GAGLIANO

03/17/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: FELDHAMER, LOIS  
Address: 9105 RED OAK LA..  
City-St-Zip: BOCA RATON, FL 33428

Title: STD  
Name: WINOGRAD, CRAIG  
Address: 21074 BLACK MAPLE LN  
City-St-Zip: BOCA RATON, FL 33428

Title: D  
Name: SEGER, JACK  
Address: 21373 CHINABERRY DR.  
City-St-Zip: BOCA RATON, FL 33428

Title: PD  
Name: DIAZ, JULIA  
Address: 21180 WHITE OAK LA.  
City-St-Zip: BOCA RATON, FL 33428

Title: SD  
Name: VOGEL, SCOTT  
Address: 21341 CHINABERRY DR  
City-St-Zip: BOCA RATON, FL 33428

Title: VD  
Name: SPRINGSTON, JEFFREY  
Address: 21270 HAZELWOOD DR  
City-St-Zip: BOCA RATON, FL 33428

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: JULIA DIAZ

PD

03/17/2010

Electronic Signature of Signing Officer or Director

Date