2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006
Secretary of State

DOCUMENT# 759259

Entity Name: TIMBERWAY COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

5522 NW 43RD STREET
GAINESVILLE, FL 32653 US

New Principal Place of Business:

5522 NW 43RD STREET
SUITE B
GAINESVILLE, FL 32653 US

Current Mailing Address:

5522 NW 43RD STREET
GAINESVILLE, FL 32653 US

New Mailing Address:

5522 NW 43RD STREET
SUITE B
GAINESVILLE, FL 32653 US

FEI Number: 59-2120174 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOSSHARDT PROPERTY MANAGEMENT, INC.
5522 NW 43 STREET
GAINESVILLE, FL 32653 US

Name and Address of New Registered Agent:

RHINESMITH, PATRICIA
C/O BOSSHARDT PROPERTY MGT INC
5522 NW 43 STREET SUITE B
GAINESVILLE, FL 32653 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: PATRICIA RHINESMITH 04/21/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GALLOWAY, JAMES
Address: 3322 NW 52ND TERR
City-St-Zip: GAINESVILLE, FL 32606

Title: DS ( ) Delete
Name: STONE, IRWIN
Address: 3307 NW 51ST TERRACE
City-St-Zip: GAINESVILLE, FL 32606

Title: TD ( ) Delete
Name: LILLEY, LINDA
Address: 3400 NW 52 TERR
City-St-Zip: GAINESVILLE, FL 32606

Title: D ( ) Delete
Name: ROSENQUIST, RUTH JEAN
Address: 5126 NW 34TH PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: D ( ) Delete
Name: HENLEY, ANN
Address: 3328 NW 51ST TERRACE
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES GALLOWAY PD 04/21/2006
Electronic Signature of Signing Officer or Director Date