2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2007 8:00 am
Secretary of State
04-05-2007 90137 003 ****61.25

DOCUMENT # N01000005553

1. Entity Name
TIMBER LAKE AT THREE OAKS HOMEOWNERS' ASSOCIATION, INC.

40050848

Principal Place of Business	Mailing Address
12650 WHITEHALL DR FORT MYERS, FL 33907	C/O BENSON'S INC 12650 WHITEHALL DR FORT MYERS, FL 33907

02272007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 48-1256422 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BENSON, MARK R 12650 WHITEHALL DR FORT MYERS, FL 33907	Name: VANDALL, BONITA D Street Address (P.O. Box Number is Not Acceptable): 12650 WHITEHALL DR City: FORT MYERS **FL** Zip Code: 33907

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: B. DUQUE BONITA D. VANDALL 3-30-07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MONTEAGUDO, BRYAN 9425 SCARLETT OAK AVE FORT MYERS, FL 33912	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Monteagudo, Bryan 9425 Scarlette Oak Ave Fort Myers, FL 33967	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ORTIZ, ERIC 9339 GOLDEN RAIN LN FORT MYERS, FL 33912	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Ortiz, Eric 9339 Golden Rain Ln. Fort Myers, FL 33967	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD OPPERMAN, MARGARITA 9411 SCARLETT OAK AVE FORT MYERS, FL 33912	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Opperman, Margarita 9411 Scarlette Oak Ave. Fort Myers, FL 33967	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CARLOUGH, MAUREEN 9349 CHESTNUT TREE LOOP FORT MYERS, FL 33912	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Graham, Rick 17608 Holly Oak Ave Fort Myers, FL 33967	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KALI, JOZSEF 9411 SCARLETT OAK AVE FORT MYERS, FL 33912	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ID Kali, Jozsef 9411 Scarlett Oak Ave Fort Myers, FL 33967	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 040307
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #