

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000264

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: TIMBERCREST RESIDENCE, INC.

**Current Principal Place of Business:**

FOREST EDGE DR.  
DELTONA, FL 32725

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 6348  
DELTONA, FL 327286348

**New Mailing Address:**

FEI Number: 26-0030040

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PALMETTO CHARTER SERVICES, INC.  
150 MAGNOLIA AVE.  
DAYTONA BEACH, FL 321152491 US

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

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: D/P ( ) Delete  
Name: KNOTT, BRENDA  
Address: PO BOX 6348  
City-St-Zip: DELTONA, FL 327286348

Title: D/T ( ) Delete  
Name: GENOVESI, PETER  
Address: PO BOX 6348  
City-St-Zip: DELTONA, FL 327286348

Title: D/S ( ) Delete  
Name: ALLEN, PAUL  
Address: PO BOX 6348  
City-St-Zip: DELTONA, FL 327286348

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

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

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

Title: D/S (X) Change ( ) Addition  
Name: LANTZY, THOMAS C  
Address: PO BOX 6348  
City-St-Zip: DELTONA, FL 327286348

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: BRENDA L. KNOTT

PRES

04/28/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date