

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 08:00 AM
Secretary of State

DOCUMENT # N02999		
1. Entity Name TIMBERLAKE CONDOMINIUM NO. "2" ASSOCIATION, INC.		
Principal Place of Business 17401 BIRCHWOOD LANE S.W. FT. MYERS, FL 33908	Mailing Address GULF SHORES C.A.M. 76 PONDELLA RD, STE 201 N. FORT MYERS, FL 33903	



DO NOT WRITE IN THIS SPACE

04112005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2385066	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent LAPOSTA, DICK GULF SHORES C.A.M. 76 PONDELLA RD STE 201 FORT MYERS, FL 33903
--

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent Signature required when reinstalling) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2005**

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

U00000324729
04/22/05-80103-019 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARRIERUE, RUTH L 17426-1 BIRCHWOOD LN FT. MYERS, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAJOR, LAUREL 17420-2 BIRCHWOOD LN. FORT MYERS, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MACHOVINA, RAY 17424 BIRCHWOOD LN #15 FT MYERS, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORREALE, GUS 17426-3 BIRCHWOOD LN. FORT MYERS, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

[Handwritten signatures: D. Major, R. Machovina, G. Morreale, R. Carrierue]