## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000000358

FILED Apr 24, 2008 Secretary of State

Entity Nar	me: TIMBER	ISLE HOMEOWNERS ASSO	CIATION, IN	IC.		
Current Principal Place of Business:				New Principal Place of Business:		
8009 S. ORANGE AVE. ORLANDO, FL 328096711				5955 T.G. LEE BLVD. SUITE 300 ORLANDO, FL 32822		
Current Mailing Address:				New Mailing Address:		
	RANGE AVE. ), FL 3280967	711	;	5955 T.G LEE BLVD SUITE 300 ORLANDO, FL 32822		
FEI Number:	84-1678311	FEI Number Applied For ( )	FEI Numl	ber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
LELAND MANAGEMENT 8009 S. ORANGE AVE ORLANDO, FL 32809 US The above named entity submits this statement for the purpose of				LELAND MANAGEMENT 5955 T.G. LEE BLVD. SUITE 300 ORLANDO, FL 32822 US		
	named entity e of Florida.	submits this statement for the	purpose of	cnanging its registered	oπice or registered agent, or both,	
SIGNATURE: REBECCA FURLOW					04/24/2008	
	Electro	nic Signature of Registered A	gent		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD ( CARR, EDITH 838 TIMBER II ORLANDO, FL		1	Title: ( Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VD ( DAVIS, RONAI 16770 CEDAR ORLANDO, FL	RUN DR	1	Title: ( Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	STD ( THOMAS, WIL 839 TIMBER II ORLANDO, FL	SLE DR	1	Title: ( Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify 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: REBECCA FURLOW PRES 04/24/2008