2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000360

FILED Apr 22, 2009 Secretary of State

Entity Name: TIMBER POINTE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5955 T.G. LEE BLVD. 6972 LAKE GLORIA BLVD SUITE 300 ORLANDO, FL 32809 ORLANDO, FL 32822

Current Mailing Address: New Mailing Address:

5955 T.G. LEE BLVD. 6972 LAKE GLORIA BLVD SUITE 300 ORLANDO, FL 32809 ORLANDO, FL 32822

FEI Number: 84-1678312 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LELAND MANAGEMENT
5955 T.G. BLVD.
SUITE 300
ORLANDO, FL 32822 US

LELAND MANAGEMENT
6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 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: 04/22/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition
Name: LOIA, PATRICK Name: YARD, MICHELLE R

PD ROY 1665

 Address:
 16526 CEDAR CREST DR.
 Address:
 PO BOX 1665

 City-St-Zip:
 ORLANDO, FL 32828
 City-St-Zip:
 ORLANDO, FL 32802

Title: VD () Delete Title: VD (X) Change () Addition Name: YARD, MICHELLE Name: LE TRAN, VINH

 Address:
 PO BOX 1665
 Address:
 848 PARK GROVE COURT

 City-St-Zip:
 ORLANDO, FL 32802
 City-St-Zip:
 ORLANDO, FL 32828

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 LE TRAN, VINH
 Name:
 CITRO, PAUL G

 Address:
 848 PARK GROVE COURT
 Address:
 16080 OLD ASH LOOP

 City-St-Zip:
 ORLANDO, FL 32828
 City-St-Zip:
 ORLANDO, FL 32828

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: MICHELLE R. YARD PD 04/22/2009