2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007552

FILED May 01, 2007 Secretary of State

Entity Name: RIVER OAKS AT TIMBER SPRINGS HOMEOWNERS' ASSOCIATION, INC.

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

8009 S. ORANGE AVE. ORLANDO, FL 328096711

Current Mailing Address: New Mailing Address:

8009 S. ORANGE AVE ORLANDO, FL 328096711

FEI Number: 20-3288799 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

LELAND MANAGEMENT 8009 SOUTH ORANGE AVE ORLANDO, FL 32809

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

MORSE, CYNTHIA STINE, KEVIN Name: Name:

120 FAIRWAY WOODS BOULEVARD Address: 120 FAIRWAY WOODS BOULEVARD Address:

City-St-Zip: ORLANDO, FL 32824 City-St-Zip: ORLANDO, FL 32824

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

Name: VIDRINE, ANDRE Name: PHILLIPS, MATT

Address: 120 FAIRWAY WOODS BOULEVARD Address: 120 FAIRWAY WOODS BOULEVARD

City-St-Zip: ORLANDO, FL 32824 City-St-Zip: ORLANDO, FL 32824

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

MCFADDEN, TRACY Name: STACK, JOHN Name: 120 FAIRWAY WOODS BOULEVARD 120 FAIRWAY WOODS BOULEVARD Address: Address:

City-St-Zip: ORLANDO, FL 32824 City-St-Zip: ORLANDO, FL 32824

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: KEVIN STINE PD 05/01/2007