

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008151

**FILED**  
**Feb 16, 2012**  
**Secretary of State**

**Entity Name:** TIMUQUANA PARK HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

25445 STATE RD. 46  
SORRENTO, FL 32776

**New Principal Place of Business:**

**Current Mailing Address:**

25445 STATE RD. 46  
SORRENTO, FL 32776

**New Mailing Address:**

**FEI Number:** 26-4336599

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HEGSTROM, CRAIG  
25445 STATE RD. 46  
SORRENTO, FL 32776 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: DP  
Name: HEGSTROM, CRAIG  
Address: 25445 STATE RD. 46  
City-St-Zip: SORRENTO, FL 32776

Title: D  
Name: SANCHEZ, JOSEPH  
Address: 12115 FULTON RIDGE DR  
City-St-Zip: FULTON, MD 20759 20

Title: DST  
Name: VANDERWALL, LUCY  
Address: 25445 S.R. 46  
City-St-Zip: SORRENTO, FL 32776

I hereby 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 all other like empowered.

SIGNATURE: CRAIG HEGSTROM

DP

02/16/2012

Electronic Signature of Signing Officer or Director

Date