

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08212

FILED
Mar 04, 2009
Secretary of State

Entity Name: TIMBERLINE VILLAGE I OF CROSS CREEK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13611 MCGREGOR BLVD
SUITE 6
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

13611 MCGREGOR BLVD
SUITE 6
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 59-2571984

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:

APEX MANAGEMENT SERVICES
13611 MCGREGOR BLVDS
SUITE 6
FORT MYERS, FL 33919 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: GRACE J MURRAY

03/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DE LA MATER, SHARON
Address: 13090 WHITE MARSH LN #200
City-St-Zip: FORT MYERS, FL 33912

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD () Delete
Name: MILLER, JUDIE
Address: 13090 WHITE MARSH LN #207
City-St-Zip: FORT MYERS, FL 33912

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD () Delete
Name: HUBBARD, FAY
Address: 13090 WHITE MARSH LN #100
City-St-Zip: FORT MYERS, FL 33912

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD () Delete
Name: HASLETT, MYRNA
Address: 13080 WHIATE MARSH LN #202
City-St-Zip: FORT MYERS, FL 33912

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: CORY, DONALD
Address: 13080 WHITE MARSH LN #202
City-St-Zip: FORT MYERS, FL 33912

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: FAY HUBBARD

TD

03/04/2009

Electronic Signature of Signing Officer or Director

Date