

4-2998 B- 5943 c
FILE NOW: FILING FEE IS \$61.25

FILED
Apr 29 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N23138** (3)

1. Corporation Name

TIMBERWOODS OF NAPLES ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**3301 TIMBERWOOD CIRCLE
NAPLES FL 33942**

**2336 IMMOKALEE RD #144
NAPLES FL 33942-1445
US**

3. Date incorporated or Qualified

10/23/1987

4. FEI Number

65-0169846

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 **2440 Golden Gate Pkwy**

22 City & State

27 **114**

23 Zip

Country

28 **NAPLES FL**

29 **34105**

Country

30 **USA**

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SAMONCE, ROSEN C
2375 TAMAMI TRAIL NO. STE 308
STE 201
NAPLES FL 34103**

81 Name

KELLER, JOHN

82 Street Address (P.O. Box Number is Not Acceptable)

3398 Timberwood Cir

83

84 City

NAPLES

FL

85 Zip Code

34105

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **JOHN KELLER PRES**

4/8/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **VD** ☒ DELETE
NAME **PEPPERALL, KEVIN**
STREET ADDRESS **3379 TIMBERWOOD CIRCLE**
CITY-ST-ZIP **NAPLES FL**

1.1 TITLE **PD** ☐ Change ☒ Addition
1.2 NAME **KELLER, JOHN**
1.3 STREET ADDRESS **3398 Timberwood Cir**
1.4 CITY-ST-ZIP **Naples FL 34105**

TITLE **TD** ☒ DELETE
NAME **WILLIAMS, HELENE C.**
STREET ADDRESS **3315 TIMBERWOOD CIRCLE**
CITY-ST-ZIP **NAPLES FL**

2.1 TITLE **VD** ☐ Change ☒ Addition
2.2 NAME **WILLIAMS, MARC**
2.3 STREET ADDRESS **3400 Timberwood Cir**
2.4 CITY-ST-ZIP **Naples FL 34105**

TITLE **SD** ☒ DELETE
NAME **DAALSTROM, CATHERINE**
STREET ADDRESS **2321 TIMBERWOOD CIRCLE**
CITY-ST-ZIP **NAPLES FL**

3.1 TITLE **SP** ☐ Change ☒ Addition
3.2 NAME **Kirkpatrick, Shad**
3.3 STREET ADDRESS **3353 Timberwood Cir**
3.4 CITY-ST-ZIP **Naples Fla 34105**

TITLE **PD** ☒ DELETE
NAME **STAFFORD, LILLIAN**
STREET ADDRESS **3395 TIMBERWOOD CIR**
CITY-ST-ZIP **NAPLES FL**

4.1 TITLE **Hannon, Gerald** ☐ Change ☒ Addition
4.2 NAME **3397 Timberwood Cir**
4.3 STREET ADDRESS **Naples Fla 34105**
4.4 CITY-ST-ZIP

TITLE **VD** ☐ DELETE
NAME **BARLEY, CAROL**
STREET ADDRESS **3308 TIMBERWOOD CIRCLE**
CITY-ST-ZIP **NAPLES FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **JOHN KELLER PRES**

4/7/98

941-643-1933

CR2E037 (10/97)