

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N23138

1. Entity Name

TIMBERWOODS OF NAPLES ASSOCIATION, INC.

FILED

Mar 08, 2000 8:00 am
Secretary of State

03-08-2000 90045 034 ****61.25

Principal Place of Business

Mailing Address

3301 TIMBERWOOD CIRCLE
NAPLES FL 33942

2640 GOLDEN GATE
STE 114
NAPLES FL 34105-3200
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0169846

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KELLER, JOHN
3398 TIMBERWOOD CIR

NAPLES FL 34105

Name

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

City

FL

Zip Code

8. 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

Signature, by

Printed name

Registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/10/00

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VD
KELLER, JOHN
3398 TIMBERWOOD CIR
NAPLES FL 34105

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
WILLIAMS, MARC
3400 TIMBERWOOD CIR
NAPLES FL 34105

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SD
KIRKPATRICK, THAD
3353 TIMBERWOOD CIR
NAPLES FL 34105

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
HANNON, GERARD
3397 TIMBERWOOD CIR
NAPLES FL 34105

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VD
BARLEY, CAROL
3308 TIMBERWOOD CIRCLE
NAPLES FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/00

(941) 649-5526

CR2E037 (9/99)