

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23138

FILED
Apr 28, 2006
Secretary of State

Entity Name: TIMBERWOODS OF NAPLES ASSOCIATION, INC.

Current Principal Place of Business:

3301 TIMBERWOOD CIRCLE
NAPLES, FL 33942

New Principal Place of Business:

4306 ARNOLD AVENUE
NAPLES, FL 34104

Current Mailing Address:

3400 TAMIAMI TRAIL N.
SUITE 202
NAPLES, FL 341033717 US

New Mailing Address:

PO BOX 110339
NAPLES, FL 34108 US

FEI Number: 65-0169846

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIANA GURGES, ACCOUNTANT
3400 TAMIAMI TRAIL NORTH
STE - 202
NAPLES, FL 341033717 US

Name and Address of New Registered Agent:

KUETER, BEVERLY
4306 ARNOLD AVENUE
NAPLES, FL 34108 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: BEVERLY KUETER

04/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: KILLPACK, ANNE ROSE
Address: 3400 TIMBERWOOD CIR
City-St-Zip: NAPLES, FL 34105

Title: PD () Delete
Name: BARLEY, CHARLES
Address: 3308 TIMBERWOOD CIRCLE
City-St-Zip: NAPLES, FL 34105

Title: D () Delete
Name: HOLLOWAY, JERRY
Address: 3383 TIMBERWOOD CIRCLE
City-St-Zip: NAPLES, FL 34105

Title: D () Delete
Name: CONLIN-MOORE, MARY
Address: 3316 TIMBERWOOD CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: DV () Delete
Name: MEMIM, CHRISTOPHER
Address: 3332 TIMBERWOOD CIR
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES BARLEY

PD

04/28/2006

Electronic Signature of Signing Officer or Director

Date