

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90302 037 ****61.25

DOCUMENT # N23138

1. Entity Name
TIMBERWOODS OF NAPLES ASSOCIATION, INC.



Principal Place of Business
**3301 TIMBERWOOD CIRCLE
NAPLES, FL 33942**

Mailing Address
**2685 HORSESHOE DR SOUTH
215
NAPLES, FL 34104 US**

**SUITE 202
NAPLES, FLORIDA 34103-3717
90102563**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0169846

Applied For

Not Applicable

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
STE - 202
NAPLES, FL 34105**

Name **DIANA GURGES, ACCOUNTANT**
Street Address (P.O. Box Number is Not Acceptable)
**3400 TAMiami TRAIL NORTH
SUITE 202
NAPLES, FLORIDA 34103-3717**
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent's signature required when resigning)

DATE

FILE NOW FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
VD	KELLER, JOHN	3398 TIMBERWOOD CIR	NAPLES, FL 34105	
PQ	BARLEY, CHARLES	3308 TIMBERWOOD CIRCLE	NAPLES, FL 34105	<input type="checkbox"/> Delete
STD	TODD, KATHERINE	195 VINTOU CIRCLE	NAPLES, FL 34119	<input checked="" type="checkbox"/> Delete
D	LANKFORD, BILL	3329 TIMBERWOOD CIRCLE	NAPLES, FL 34109	<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
DVP	Cuscheri, Sharon	3336 Timberwood Circle	Naples, FL 34105	
DS	Ralston, Olivia	3330 Timberwood Circle	Naples, FL 34105	<input checked="" type="checkbox"/> Addition
D	Walsh, Bill	3428 Timberwood Circle	Naples, FL 34105	<input checked="" type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/10/03

Date

Daytime Phone #

CR2E037 (10/02)