

**2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Jun 02, 2010  
Secretary of State**

DOCUMENT# N25183

**Entity Name:** TIMACUAN COMMUNITY SERVICES ASSOCIATION, INC.**Current Principal Place of Business:**390 WEST STATE RD.434  
SUITE 203  
LONGWOOD, FL 327504977 US**New Principal Place of Business:**735 PRIMERA BLVD  
SUITE 110  
LAKE MARY, FL 32746 US**Current Mailing Address:**P.O. BOX 197043  
WINTER SPRINGS, FL 327197043 US**New Mailing Address:**735 PRIMERA BLVD  
STE 110  
LAKE MARY, FL 32746 US

FEI Number: 59-2885722

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**PALMERSTON LLC  
390 WEST S.R. 434 STE.203  
LONGWOOD, FL 327504977 US**Name and Address of New Registered Agent:**PREMIER PROPERTY MANAGEMENT OF CFL INC.  
735 PRIMERA BLVD STE 110  
LAKE MARY, FL 32746 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: GINA N HOLBROOK

06/02/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: D  
Name: KIMMEL, BECKY  
Address: 735 PRIMERA BLVD STE 110  
City-St-Zip: LAKE MARY, FL 32746Title: SD  
Name: BLAKE, PAT  
Address: 735 PRIMERA BLVD STE 110  
City-St-Zip: LAKE MARY, FL 32746Title: VD  
Name: MUZEKA, ROBIN  
Address: 735 PRIMERA BLVD STE 110  
City-St-Zip: LAKE MARY, FL 32746Title: PD  
Name: BRAME, ED  
Address: 735 PRIMERA BLVD STE 110  
City-St-Zip: LAKE MARY, FL 32746Title: DT  
Name: HAYES, JACK  
Address: 735 PRIMERA BLVD STE 110  
City-St-Zip: LAKE MARY, FL 32746Title: D  
Name: WILKES, JAMIE  
Address: 735 PRIMERA BLVD STE 110  
City-St-Zip: LAKE MARY, FL 32746

I hereby 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 all other like empowered.

SIGNATURE: ED BRAME

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06/02/2010

Electronic Signature of Signing Officer or Director

Date