

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31259

FILED
Mar 30, 2009
Secretary of State

Entity Name: TIMBER LAKE CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

MBA ASSOCIATES INC.
187 FOREST LAKES BLVD
NAPLES, FL 34105 US

New Principal Place of Business:

Current Mailing Address:

MBA ASSOCIATES INC.
187 FOREST LAKES BLVD
NAPLES, FL 34105 US

New Mailing Address:

FEI Number: 65-0109698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MBA ASSOCIATES, INC
187 FOREST LAKES BLVD
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

GRACEY, ROBERT T SR.
187 FOREST LAKES BLVD
NAPLES, FL 34105 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: ROBERT T. GRACEY, SR.

03/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TSD () Delete
Name: PONTORIERO, JULENE
Address: 220 TIMBERLAKE CIR B-101
City-St-Zip: NAPLES, FL 34104

Title: D () Delete
Name: DUBE, PAULA
Address: 220 TIMBERLAKE CIR B-202
City-St-Zip: NAPLES, FL 34104

Title: DS () Delete
Name: DUBE, DONALD
Address: 220 TIMBER LAKE CIR B-202
City-St-Zip: NAPLES, FL 34105

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: LYNCH, FRED
Address: 280 TIMBERLAKE CIR H-201
City-St-Zip: NAPLES, FL 34104

Title: D (X) Change () Addition
Name: CHIRCO, MARYANN
Address: 250 TIMBER LAKE CIR E-102
City-St-Zip: NAPLES, FL 34104

Title: DP () Change (X) Addition
Name: GEASON, JANET
Address: 270 TIMBER LAKE CIRCLE #G-101
City-St-Zip: NAPLES, FL 34104

Title: D () Change (X) Addition
Name: O'BRIEN, FRANCIS E
Address: 260 TIMBER LAKE CIRCLE #F-104
City-St-Zip: NAPLES, FL 34104

I hereby certify that the information supplied with this filing does not qualify 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: JANET GEASON

PRES

03/30/2009

Electronic Signature of Signing Officer or Director

Date