

**2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**May 24, 2010**  
**Secretary of State**

DOCUMENT# N31259

**Entity Name:** TIMBER LAKE CLUB CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**3784 PROGRESS AVE  
107  
NAPLES, FL 34104 US**New Principal Place of Business:**187 FOREST LAKES BLVD  
NAPLES, FL 34105 US**Current Mailing Address:**3784 PROGRESS AVE  
107  
NAPLES, FL 34104 US**New Mailing Address:**187 FOREST LAKES BLVD  
NAPLES, FL 34105 US**FEI Number:** 65-0109698**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**HOWARD, PAM  
3784 PROGRESS AVE  
107  
NAPLES, FL 34105 US**Name and Address of New Registered Agent:**GRACEY, ROBERT  
187 FOREST LAKES BLVD  
107  
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.

05/24/2010

\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**OFFICERS AND DIRECTORS:****Title:** DP  
**Name:** GEASON, JANET C  
**Address:** 270 TIMBERLAKE CIRCLE G101  
**City-St-Zip:** NAPLES, FL 34104**Title:** DT  
**Name:** PONTORIERO, JULENE  
**Address:** 220 TIMBERLAKE CIR B101  
**City-St-Zip:** NAPLES, FL 34104**Title:** DS  
**Name:** CHIRCO, MARYANN  
**Address:** 250 TIMBER LAKE CIR E-102  
**City-St-Zip:** NAPLES, FL 34104**Title:** D  
**Name:** ROSENBERGER, BARBARA  
**Address:** 240 TIMBER LAKE CIRCLE #D-101  
**City-St-Zip:** NAPLES, FL 34104**Title:** D  
**Name:** O'BRIEN, FRANCIS E  
**Address:** 260 TIMBER LAKE CIRCLE #F-104  
**City-St-Zip:** NAPLES, FL 34104

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: JANET GEASON

PD

05/24/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date