

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51041

FILED
Mar 22, 2010
Secretary of State

Entity Name: THE WOODLANDS OF TIMBER PINES, INC.

Current Principal Place of Business:

6872 TIMBER PINES BLVD
SPRING HILL, FL 34606 US

New Principal Place of Business:

Current Mailing Address:

6872 TIMBER PINES BLVD
SPRING HILL, FL 34606 US

New Mailing Address:

FEI Number: 59-3168890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DROOGER, FRANKIE
6872 TIMBER PINES BLVD
SPRING HILL, FL 34606 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: BAIRD, PETER
Address: 3112 APPLEBLOSSOM TRAIL
City-St-Zip: SPRING HILL, FL 34606

Title: PD
Name: BENYON, JOHN
Address: 3169 APPLE BLOSSOM TRAIL
City-St-Zip: SPRING HILL, FL 34606

Title: D
Name: MACCALLUM, JEAN
Address: 3029 APPLEBLOSSOM TRAIL
City-St-Zip: SPRING HILL, FL 34606

Title: D
Name: RATH, FRANK
Address: 3208 APPLE BLOSSOM TRAIL
City-St-Zip: SPRING HILL, FL 34606

Title: ST
Name: CHIOVITTI, JUNE
Address: 3005 APPLEBLOSSOM TRAIL
City-St-Zip: SPRING HILL, FL 34606

Title: VD
Name: HITTler, MARY
Address: 3121 APPLE BLOSSOM TRAIL
City-St-Zip: SPRING HILL, FL 34606

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: JUNE CHIOVITTI

ST

03/22/2010

Electronic Signature of Signing Officer or Director

Date