

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000705

FILED
Mar 12, 2009
Secretary of State

Entity Name: TIMBER GREENS COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

6333 TIMBER GREENS BLVD.
NEW PORT RICHEY, FL 34655 US

New Principal Place of Business:

Current Mailing Address:

6333 TIMBER GREENS BLVD.
NEW PORT RICHEY, FL 34655 US

New Mailing Address:

FEI Number: 59-3238342

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANDERHAM, SHARON
9603 CONSERVATION DRIVE
NEW PORT RICHEY, FL 34655 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: P () Delete
Name: VANDERHAM, SHARON
Address: 9603 CONSERVATION DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VP () Delete
Name: DEMPSEY, J. DENIS
Address: 6111 COUNTRY RIDGE LANE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D () Delete
Name: PIERETTI, JOHN
Address: 9419 SUMMERBREEZE TERRACE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D () Delete
Name: SCHOMMER, WILLIAM C
Address: 6023 COUNTRY RIDGE LANE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D () Delete
Name: OHLERKING, ARTHUR L
Address: 5939 PRECIOUS VIEW COURT
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: RICHARDS, DONALD L
Address: 9644 WOODHOLLOW COURT
City-St-Zip: NEW PORT RICHEY, FL 34655

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

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: SHARON VANDERHAM

P

03/12/2009

Electronic Signature of Signing Officer or Director

Date