

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90223 008 ****61.25

DOCUMENT # N94000004530

1. Entity Name

NEWBERRY HILLS HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

**5517 SW 69 TERRACE
GAINESVILLE FL 32608**

Mailing Address

**5517 SW 69 TERRACE
GAINESVILLE FL 32608**

2. Principal Place of Business

22515 W. Newberry Rd.

3. Mailing Address

22515 W. Newberry Rd.

Suite, Apt. #, etc.

Suite A

Suite, Apt. #, etc.

Suite A

City & State

Newberry, FL.

City & State

Newberry, FL.

Zip

32669

Country

US

Zip

32669

Country

US

4. FEI Number **59-3270807**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**MILLER, DAVID M
5517 SW 69 TERRACE
GAINESVILLE FL 32608**

7. Name and Address of New Registered Agent

Name

Kenneth Timbrook

Street Address (P.O. Box Number is Not Acceptable)

22515 W. Newberry Rd. Suite A

City

Newberry

FL

Zip Code

32669

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Kenneth Timbrook, Kenneth Timbrook

March 25, 2003

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **MILLER, DAVID M**
STREET ADDRESS **5517 SW 69 TERRACE**
CITY-ST-ZIP **GAINESVILLE FL 32608**

TITLE **D** ☒ Delete
NAME **COX, ALLISON**
STREET ADDRESS **5517 SW 69 TERRACE**
CITY-ST-ZIP **GAINESVILLE FL 32608**

TITLE **D** ☒ Delete
NAME **BUCKLEY, BEVERLY**
STREET ADDRESS **5517 SW 69 TERRACE**
CITY-ST-ZIP **GAINESVILLE FL 32608**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Change ☐ Addition
NAME **Kenneth Timbrook**
STREET ADDRESS **22515 W. Newberry Rd. Suite A**
CITY-ST-ZIP **Newberry, FL. 32669**

TITLE **D** ☒ Change ☐ Addition
NAME **Joseph P. Andes**
STREET ADDRESS **2723 NW 245th DR.**
CITY-ST-ZIP **Newberry, FL 32669**

TITLE **D** ☒ Change ☐ Addition
NAME **Gayle Phelan**
STREET ADDRESS **2633 NW 244th**
CITY-ST-ZIP **Newberry, FL 32669**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kenneth Timbrook, Kenneth Timbrook

March 25, 2003 (352) 472-9204

CR2E037 (10/02)

PAID

CK NO

DATE

2604

3-27-03