

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004652

FILED  
Mar 18, 2008  
Secretary of State

**Entity Name:** THE TIMBER RIDGE OF IMMOKALEE ASSOCIATION, INC.

**Current Principal Place of Business:**

2449 SANDERS PINES CIRCLE  
IMMOKALEE, FL 34142 US

**New Principal Place of Business:**

**Current Mailing Address:**

2449 SANDERS PINES CIRCLE  
IMMOKALEE, FL 34142 US

**New Mailing Address:**

900 BROAD AVENUE SOUTH  
UNIT 2C  
NAPLES, FL 34102 US

**FEI Number:** 65-0748601

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KUEHNER, CARL J  
900 BROAD AVE S 2C  
NAPLES, FL 34102 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: C ( ) Delete  
Name: KUEHNER, CARL  
Address: 900 BROAD AVE S 2C  
City-St-Zip: NAPLES, FL 34102

Title: VC ( ) Delete  
Name: PARKER, ALAN  
Address: 741A THIRD ST S  
City-St-Zip: NAPLES, FL 34102

Title: T ( ) Delete  
Name: PROTO, FRANK  
Address: 2125 SNOOK DR  
City-St-Zip: NAPLES, FL 34102

Title: S ( ) Delete  
Name: LANCASTER, HARRIET  
Address: 3394 CERRITO CT  
City-St-Zip: NAPLES, FL 34109

**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: ( ) 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: CARL J. KUEHNER

C

03/18/2008

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

\_\_\_\_\_  
Date