

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AN

17, 1997
E: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 FEB -9 AM 8:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N96000005274 (3)

1. Corporation Name
TIMBERLEAF VILLAGE LOT 2 - PHASE 1 HOMEOWNERS ASSOCIATION, INC.



REINSTATEMENT 97-98

Principal Place of Business Mailing Address
3348 EDGEWATER DRIVE ORLANDO FL 32804

3. Date Incorporated or Qualified 10/15/1996
3a. Date of Last Report
4. FEI Number Applied for
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business 2a. Mailing Address
21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.
22. City & State 27. City & State
23. Zip Country 28. Zip Country
24. 25. 29. 30.

9. Name and Address of Current Registered Agent
POHL, FRANK L
280 WEST CANTON AVENUE
SUITE 410
WINTER PARK FL 32789

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City FL 85. Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE 1-13-98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
D [] DELETE
STREET ADDRESS 3348 EDGEWATER DRIVE
CITY-ST-ZIP ORLANDO FL 32804
D [] DELETE
NAME BLAND, ROBERT F
STREET ADDRESS 3348 EDGEWATER DRIVE
CITY-ST-ZIP ORLANDO FL 32804
D [] DELETE
NAME HOOD, TANIA
STREET ADDRESS 3348 EDGEWATER DRIVE
CITY-ST-ZIP ORLANDO FL 32804
D [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
D [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
D [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME 300002428893--5
1.3 STREET ADDRESS -02/12/98--01061--004
1.4 CITY-ST-ZIP *****61.25 *****61.25
2.1 TITLE
2.2 NAME D Schuler, Carl Lawrence [] Change [X] Addition
2.3 STREET ADDRESS 3348 Edgewater Drive
2.4 CITY-ST-ZIP Orlando, FL 32804
3.1 TITLE
3.2 NAME 300002428893--5
3.3 STREET ADDRESS -02/12/98--01061--005
3.4 CITY-ST-ZIP *****61.25 *****61.25
4.1 TITLE
4.2 NAME 300002428893--5
4.3 STREET ADDRESS -02/12/98--01061--006
4.4 CITY-ST-ZIP *****61.25 *****61.25
5.1 TITLE
5.2 NAME ***175.00 [] Change [X] Addition
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ SIGNATURE REQUIRED

CR2E037 (4/97)

2/12/98