2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 22, 2009
Secretary of State

DOCUMENT# P03000057463

Entity Name: TIMBERWOOD PROPERTIES, INC.

Current Principal Place of Business:

142 PARK CENTRE ST
LEESBURG, FL 34778

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2200
LADY LAKE, FL 32158

New Mailing Address:

FEI Number: 55-0830571 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CICHIELO, JAMES S
3150 LAKE GRIGGIN RD
LADY LAKE, FL 32159 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: PD ( ) Delete
Name: CICHIELO, JAMES S
Address: 3841 OAK POINTE DR
City-St-Zip: LADY LAKE, FL 32159

Title: VD ( ) Delete
Name: COON, TODD M
Address: 91000 CR 128C
City-St-Zip: WILDWOOD, FL 34785

Title: STD (X) Delete
Name: PONDS, CHRISTOPHER M
Address: 1401 ANDERSON LANE
City-St-Zip: LADY LAKE, FL 32159

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change ( ) Addition
Name: PONDS, CHRISTOPHER M
Address: 1401 ANDERSON LANE
City-St-Zip: LADY LAKE, FL 32159

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER M. PONDS STD 05/22/2009

Electronic Signature of Signing Officer or Director — Date