

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743649

Entity Name: TIMUQUANA VILLAGE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**4358 TIMUQUANA ROAD
JACKSONVILLE, FL 32210**Current Mailing Address:**4358 TIMUQUANA ROAD
CLUBHOUSE SUITE A
JACKSONVILLE, FL 32210 US**FEI Number:** 59-1930370**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RIGGS, LAUREN H.
4358 TIMUQUANA RD
UNIT 140
JACKSONVILLE, FL 32210 US*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:** LAUREN H. RIGGS

02/02/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	RIGGS, LAUREN H
Address	4358 TIMUQUANA RD UNIT #140
City-State-Zip:	JACKSONVILLE FL 32210

Title	VP
Name	DAZE, DOUGLAS E
Address	4358 TIMUQUANA RD UNIT 126
City-State-Zip:	JACKSONVILLE FL 32210

Title	SECRETARY
Name	HETZLER, WILLIAM E
Address	4358 TIMUQUANA RD UNIT 206
City-State-Zip:	JACKSONVILLE FL 32210

Title	TREASURER
Name	VALLE, MARK D
Address	4358 TIMUQUANA RD UNIT 112
City-State-Zip:	JACKSONVILLE FL 32210

Title	DIRECTOR
Name	MATTOX, JOSEPH P
Address	4358 TIMUQUANA RD UNIT 130
City-State-Zip:	JACKSONVILLE FL 32210

I hereby 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 all other like empowered.

SIGNATURE: LAUREN H. RIGGS

PRESIDENT

02/02/2018

Electronic Signature of Signing Officer/Director Detail

Date