

2013 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
JACKSONVILLE, FL 32210

FEI Number: 59-1930370

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAMMOCK, LINDA CTREASUR
4358 TIMUQUANA RD #207
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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name HARTRIDGE, DOROTHY
Address 4358 TIMUQUANA RD #190
City-State-Zip: JACKSONVILLE FL 32210

Title T
Name HAMMOCK, LINDA
Address 4358 TIMUQUANA ROAD, #207
City-State-Zip: JACKSONVILLE FL 32210

Title P
Name IRA, STEWART
Address 5303 ORTEGA BLVD
City-State-Zip: JACKSONVILLE FL 32210

Title S
Name MAKOUL, AMANDA
Address 4358 TIMUQUANA ROAD UNIT 178
City-State-Zip: JACKSONVILLE FL 32210

Title D
Name PINKERTON, MILDRED
Address 4358 TIMUQUANA RD #147
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: LINDA HAMMOCK

TREASURER

03/05/2013

Electronic Signature of Signing Officer/Director Detail

Date