

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761562

Entity Name: TIMBER PINES COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

6872 TIMBER PINES BLVD.
SPRING HILL, FL 34606

Current Mailing Address:

6872 TIMBER PINES BLVD.
SPRING HILL, FL 34606 US

FEI Number: 59-2155799

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SETELIUS, LYNN
6872 TIMBER PINES BLVD
SPRING HILL, FL 34606 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 PRESIDENT
Name VANDUSEN, RALPH S
Address 6872 TIMBER PINES BLVD
City-State-Zip: SPRING HILL FL 34606

Title DIRECTOR
Name OHLENROTH, RICHARD J
Address 6872 TIMBER PINES BLVD
City-State-Zip: SPRING HILL FL 34606

Title TREASURER
Name DONNELLY, STEPHEN F
Address 6872 TIMBER PINES BLVD.
City-State-Zip: SPRING HILL FL 34606

Title DIRECTOR
Name THOMPSON, MICHAEL
Address 6872 TIMBER PINES BLVD
City-State-Zip: SPRING HILL FL 34606

Title VP
Name SKALKOWSKI, JAMES H
Address 6872 TIMBER PINES BLVD
City-State-Zip: SPRING HILL FL 34606

Title DIRECTOR
Name HOGGINS, LYNN M
Address 6872 TIMBER PINES BLVD.
City-State-Zip: SPRING HILL FL 34606

Title SECRETARY
Name MURPHY, MICHAEL J
Address 6872 TIMBER PINES BLVD.
City-State-Zip: SPRING HILL FL 34606

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: RALPH S VANDUSEN

PRESIDENT

03/05/2025

Electronic Signature of Signing Officer/Director Detail

Date