## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25935

Entity Name: RESIDENTS OF TANGLEWOOD ASSOCIATION, INC.

**FILED** Apr 23, 2019 **Secretary of State** 4270962636CC

## **Current Principal Place of Business:**

3993 TANGLE DR. TITUSVILLE, FL 32796

## **Current Mailing Address:**

P. O. BOX 514

TITUSVILLE. FL 32782 US

FEI Number: 59-2949209 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

COTTRILL, CHRISTOPHER JOHN 846 CRESTWOOD AVE TITUSVILLE, FL 32796 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: CHRISTOPHER JOHN COTTRILL 04/23/2019

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER** BIEGLER, REGGIE Name REECE, UDIENZA Name Address P.O. BOX 514 Address P.O. BOX 514

City-State-Zip: TITUSVILLE FL 32781-0514 TITUSVILLE FL 32781-0514 City-State-Zip:

Title **BOARD MEMBER** Title **SECRETARY** Name SHEA, LINDA COTTRILL, CHRISTOPHER Name Address P. O. BOX 514 Address P.O. BOX 514

TITUSVILLE FL 32782 City-State-Zip: City-State-Zip: TITUSVILLE FL 32781-0514

**BOARD MEMBER** Title Title

Name MORGAN, DENISE Name BROWNE, LYNDA

Address P.O. BOX 514 P.O. BOX 514 Address

City-State-Zip: TITUSVILLE FL 32781-0514 City-State-Zip: TITUSVILLE FL 32781-0514

Title **BOARD MEMBER** 

WALKER, CATHERINE Name

Address

P.O. BOX 514 TITUSVILLE FL 32781-0514 City-State-Zip:

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.

04/23/2019 SIGNATURE: CHRISTOPHER COTTRILL **SECRETARY** 

Electronic Signature of Signing Officer/Director Detail

Date