

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 25, 2005 08:00 AM
Secretary of State

DOCUMENT # 666055

1. Entity Name
TANGLEWOOD MOBILE HOME SALES, INC.



Principal Place of Business Mailing Address
345 WEATHERBEE RD LOT #7 208 CAPE POINTE CIRCLE
FT PIERCE, FL 34982 JUPITER, FL 33477 US

DO NOT WRITE IN THIS SPACE



02212005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-1995166

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CONKO, BERNARD A
712 US 1 HWY
FORT PIERCE, FL 33408

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	YU, CHESTER
STREET ADDRESS	208 CAPE POINT CIRCLE
CITY - ST - ZIP	JUPITER, FL
TITLE	V
NAME	YU, CHESTER
STREET ADDRESS	208 CAPE POINT CIRCLE
CITY - ST - ZIP	JUPITER, FL
TITLE	ST
NAME	YU, CHESTER
STREET ADDRESS	208 CAPE POINT CIRCLE
CITY - ST - ZIP	JUPITER, FL 33477
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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02/25/05-80013-015 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Chester Yu **Chester Yu, President** *2/22/05* **561-762-0957**