

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

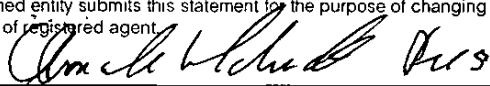
FILED
Jul 21, 2005 8:00 am
Secretary of State

07-21-2005 90028 033 ****61.25

DOCUMENT # 741551 1. Entity Name TANGLEWOOD MOBILE VILLAGE CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 3309 CHANNING DRIVE HOLIDAY FL 34690		Mailing Address 3309 CHANNING DRIVE HOLIDAY FL 34690	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



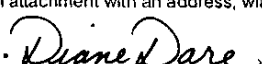
1st MOORE CR2E037 (10/04)

6. Name and Address of Current Registered Agent SMALL, FRANCES 3141 NANTUCKET DRIVE HOLIDAY FL 34690		7. Name and Address of New Registered Agent Name Donald Schmidt Street Address (P.O. Box Number is Not Acceptable) 3204 Birkdale Dr City Holiday, FL Zip Code 34690	
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  DATE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)			

FILE NOW: FEE IS \$61.25 Due By May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD NAME SMALL, FRANCES STREET ADDRESS 3309 CHANNING DR CITY-ST-ZIP HOLIDAY FL 34690	☒ Delete	TITLE Director NAME Walter Amspoker STREET ADDRESS 3309 Channing Dr CITY-ST-ZIP Holiday, FL 34690	☐ Change ☒ Addition
TITLE VD NAME SCHMIDT, DONALD STREET ADDRESS 3309 CHANNING DR. CITY-ST-ZIP HOLIDAY FL 34690	☐ Delete	TITLE PRESIDENT NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition
TITLE TD NAME DARE, DIANE STREET ADDRESS 3309 CHANNING DRIVE CITY-ST-ZIP HOLIDAY FL 34690	☐ Delete	TITLE Secretary NAME David Haney STREET ADDRESS 3309 Channing Dr CITY-ST-ZIP Holiday, FL 34690	☐ Change ☒ Addition
TITLE SD NAME GERARDI, CHERYL STREET ADDRESS 3309 CHANNING DR CITY-ST-ZIP HOLIDAY FL 34690	☐ Delete ☒	TITLE Director NAME Les Kuhn STREET ADDRESS 3309 Channing Dr CITY-ST-ZIP Holiday, FL 34690	☐ Change ☒ Addition
TITLE D NAME SANTO, DENTICE STREET ADDRESS 3309 CHANNING DR CITY-ST-ZIP HOLIDAY FL 34690	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE D NAME HOSKIN, ALAN STREET ADDRESS 3309 CHANNING DR CITY-ST-ZIP HOLIDAY FL 34690	☐ Delete	TITLE Vice President NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), 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 617, 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:  **Diane Dare, Treas.** **7/18/05** **727 938 1793**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #