2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 14, 2008 8:00 am Secretary of State

DOCUMENT #741551 1. Entity Name TANGLEWOOD MOBILE VILLAGE CONDOMINIUM ASSOCIATION, INC.						0:	2-14-2008	: 90024 0.	33 ****61	.25
			ddress HANNING DRIVE Y, FL 34690					11 910(1 8)8(1 8 (1	II BIBII BIBII SIBI	
2. Principal Pl	ace of Business - No P.O. Box #	3. Mailing Address	J. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02082	008 CI	ng-NP	CR2E03	37 (12/06)	
City & State		City & State			4. FEI N 59-	lumber 181945	8			plied For t Applicable
Zip	Country	Zip	Zip Country		5. Certi	ficate of St	atus Desired		\$8.75 Add Fee Require	
	6. Name and Address of Curre	nt Registered Agent			7. Nam	e and Add	ress of New	Registered	Agent	
ELZERMAN, LARRY 3327 CHARFORD DRIVE HOLIDAY, FL 34690				Name Street Address (P.O. Box Number is Not Acceptable)						
				City		<u></u>		FL	Zip Code	9
	named entity submits this statement ions of registered agent.	t for the purpose of changing	its registere	d office or	registered agent,	or both, in	the State of F	florida. I am	familiar with,	and accept
SIGNATURE .	State									
	Signature, typed or printed name of registered ag	junt and title if applicable (N	Off Registered	Agent signati	ure required when roinstal	ling)		DAIF		
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10.	Filing Fee is \$61.25	9. Election C Trust Funi	Campaign Fi	nancing	\$5.00 Added to	May Be Fees		Make chec orlda Depai	tment of S	tato
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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 it 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: SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 2-12-08 727-938-1793