


FILE NOW: FILING FEE IS \$61.25

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Apr 24 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **766713** (2)  
1. Corporation Name  
**TANGERINE WOODS OWNERS ASSOCIATION, INC.**

Principal Place of Business <b>756 TANGERINE WOODS LBLVD. ENGLEWOOD FL 34223</b>	Mailing Address <b>756 TANGERINE WOODS LBLVD. ENGLEWOOD FL 34223</b>
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2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	27 City & State	28 City & State
23 Zip	25 Country	29 Zip	30 Country

3. Date Incorporated or Qualified <b>01/26/1983</b>	
4. FEI Number <b>59-2408711</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>ARGUS PROPERTY MANAGEMENT INC 2100 CONSTITUTION BLVD SARASOTA FL 34231</b>		10. Name and Address of New Registered Agent	
		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Vincent R. Caputo* DATE **4/16/98**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD RUSS, JOHN 829 BRIAR GLEN CT ENGLEWOOD FL	1.1 TITLE	PD MARVIN THOMAS 797 Heathercreek Ct. Englewood FL. 34223
NAME	VD EBEL, SHIRLEY 831 BRIAR GLEN CT ENGLEWOOD FL	1.2 NAME	VD JAN PRINS 779 Candlewyck Dr. Englewood FL. 34223
STREET ADDRESS	SD ROBERT KING 883 CASCADE CT ENGLEWOOD FL	1.3 STREET ADDRESS	SD JACK DOCKX 836 Seabrooke Dr. Englewood FL. 34223
CITY-ST-ZIP	SD SHIRLEY EBEL 831 BRAIRGLEN CT ENGLEWOOD FL	1.4 CITY-ST-ZIP	TD Julie Litz 767 Tangerine Woods Blvd Englewood FL. 34223
	D CATHCART, GERALD 712 BUTTERFIELD CIR ENGLEWOOD FL	2.1 TITLE	
	D RANDY POWELL 804 SEABROOKE DR ENGLEWOOD FL	2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
		3.1 TITLE	
		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
		4.1 TITLE	
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
		5.1 TITLE	
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
		6.1 TITLE	
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Marvin Thomas* *B. Marvin Thomas*

4/16/98

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