


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 27, 2006 8:00 am**  
**Secretary of State**

02-27-2006 90103 033 \*\*\*\*61.25

<b>DOCUMENT # 766713</b> 1. Entity Name <b>TANGERINE WOODS OWNERS ASSOCIATION, INC.</b>					
Principal Place of Business <b>756 TANGERINE WOODS BLVD ENGLEWOOD FL 34223-6051</b>			Mailing Address <b>756 TANGERINE WOODS BLVD ENGLEWOOD FL 34223-6051</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	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>				1st MOORE CR2E037 (10/05)	
6. Name and Address of Current Registered Agent  <b>KUIROS, KENNETH 756 TANGERINE WOOD BLVD ENGLEWOOD FL 34223-601</b>			7. Name and Address of New Registered Agent Name <b>Harold Erikson</b> Street Address (P.O. Box Number is Not Acceptable) <b>756 Tangerine Woods Blvd.</b> City <b>Englewood</b> FL <b>34223</b>		
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 <b>Harold Erikson</b> <small>Signature, typed or printed name of registered agent and title if applicable</small>			DATE <b>2/6/06</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>		
<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		<b>Make Check Payable to</b> <b>Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE	TD <input type="checkbox"/> Delete	TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MEAD, PATRICI A	NAME	Harold Erikson		
STREET ADDRESS	756 BUTTERFIELD COURT	STREET ADDRESS	815 Seabrooke Drive		
CITY-ST-ZIP	ENGLEWOOD FL 34223	CITY-ST-ZIP	Englewood, FL 34223		
TITLE	P <input checked="" type="checkbox"/> Delete	TITLE	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	KUIROS, KENNETH	NAME	Fred Cobb		
STREET ADDRESS	805 MANCHESTER COURT	STREET ADDRESS	187 Heathercreek Court		
CITY-ST-ZIP	ENGLEWOOD FL 34223	CITY-ST-ZIP	Englewood, FL 34223		
TITLE	SD <input checked="" type="checkbox"/> Delete	TITLE	SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	HERSEY, THOMAS	NAME	Joan Shuhann		
STREET ADDRESS	708 BUTTERFIELD CIRCLE	STREET ADDRESS	817 Seabrooke Drive		
CITY-ST-ZIP	ENGLEWOOD FL 34223	CITY-ST-ZIP	Englewood, FL 34223		
TITLE	VD <input checked="" type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	ERIKSON, HAROLD	NAME	Polly Rarber		
STREET ADDRESS	815 SEABROOK DRIVE	STREET ADDRESS	817 Tangerine Woods Blvd.		
CITY-ST-ZIP	ENGLEWOOD FL 34223	CITY-ST-ZIP	Englewood, FL 34223		
TITLE	<input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME		NAME	Ronald Hardner		
STREET ADDRESS		STREET ADDRESS	719 Tangerine Woods Blvd		
CITY-ST-ZIP		CITY-ST-ZIP	Englewood, FL 34223		
TITLE	<input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME		NAME	Richard Valenti		
STREET ADDRESS		STREET ADDRESS	734 Summersea Court		
CITY-ST-ZIP		CITY-ST-ZIP	Englewood, FL 34223		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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: **Harold Erikson**

**2/6/06**

**941-473-8841**