

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90100 003 ***150.00

DOCUMENT # F76737

1. Corporation Name

TANGERINE WOODS UTILITY CORP.

Principal Place of Business

100 PALM HARBOR DRIVE
VENICE FL 34287

Mailing Address

P.O. BOX 20247
BRADENTON FL 34204

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/19/1982

2. Principal Place of Business

21 P.O. BOX 20247

Suite, Apt. #, etc.

22

City & State

23 BRADENTON, FL

Zip

24 34204

Country

25 Manatee

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-2223556

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

RUSSELL, JEFFREY S
200 SOUTH WASHINGTON BLVD
SARASOTA FL 33577

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PT ☐ DELETE

NAME LIES, DAVID J
STREET ADDRESS 2181 S FOSTER AVE
CITY-ST-ZIP WHEELING IL 60090

TITLE V ☐ DELETE

NAME UPCHURCH, PAUL H
STREET ADDRESS 2181 S FOSTER AVE
CITY-ST-ZIP WHEELING IL 60090

TITLE AV ☐ DELETE

NAME JOHNSON, RONALD R
STREET ADDRESS 725 NORTH INDIANA AVENUE
CITY-ST-ZIP ENGLEWOOD FL

TITLE AS ☐ DELETE

NAME JOHNSON, L ANN
STREET ADDRESS 725 NORTH INDIANA AVENUE
CITY-ST-ZIP ENGLEWOOD FL

TITLE S ☐ DELETE

NAME HANISCH, JEFFREY R.
STREET ADDRESS 2181 S FOSTER AVE
CITY-ST-ZIP WHEELING IL 60090

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

Johnson, Ronald R.
P.O. BOX 20247
Bradenton, FL 34204

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

Johnson, L. Ann
P.O. Box 20247
Bradenton, FL 34204

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Katherine Harris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/99

Date

941-727-1057

Daytime Phone #

CR2E034 (11/98)

0481089