

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H58980

FILED
Apr 30, 2009
Secretary of State

Entity Name: TANGLEWOOD GOLF AND COUNTRY CLUB, INC.

Current Principal Place of Business:

5916 TANGLEWOOD DRIVE
MILTON, FL 32570

New Principal Place of Business:

Current Mailing Address:

P.O. MILTON 725
MILTON, FL 32572

New Mailing Address:

5916 TANGLEWOOD DRIVE
MILTON, FL 32570

FEI Number: 59-2551838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELCH, JOHN T
5636 TERVINO DRIVE
MILTON, FL 32570 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WELCH, NANCY
Address: 5636 TREVINO DR
City-St-Zip: MILTON, FL 32570

Title: D () Delete
Name: BACH, DAVID E
Address: 5669 TREVINO DR
City-St-Zip: MILTON, FL 32570

Title: D () Delete
Name: DRIGGERS, JERRY
Address: 6404 SPRUCE ST
City-St-Zip: MILTON, FL 32570

Title: D () Delete
Name: LUSK, BILLY
Address: 5589 NORTHROP ROAD
City-St-Zip: MILTON, FL 32570

Title: T () Delete
Name: NOBLES, DEWITT
Address: 6621 CEDAR STREET
City-St-Zip: MILTON, FL 32570

Title: V () Delete
Name: BARANY, JOHN
Address: 6947 CEDAR RIDGE CIR
City-St-Zip: MILTON, FL 32570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BEACH, DAVID E
Address: 5669 TREVINO DR
City-St-Zip: MILTON, FL 32570

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: JOINER, LONNIE
Address: 4985 JOINER CIRCLE
City-St-Zip: MILTON, FL 32583

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY WELCH

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date