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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



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

DOCUMENT # N03811

1. Corporation Name

TANGLEWOOD OF WESLEY CHAPEL HOME OWNERS ASSOCIATION, INC.

Principal Place of Business

28429 WILLIAMSBURG DR.
WESLEY CHAPEL FL 33543

Mailing Address

28429 WILLIAMSBURG DR.
WESLEY CHAPEL FL 33543



2. Principal Place of Business

21 Same

2a. Mailing Address

26 Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

3. Date Incorporated or Qualified

06/21/1984

4. FEI Number

59-2452555

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

9. Name and Address of Current Registered Agent

SADOWSKY, CARL
28510 TWONBROOK LANE
WESLEY CHAPEL FL 33543

10. Name and Address of New Registered Agent

81 Name Della John
82 Street Address (P.O. Box Number is Not Acceptable)
1828 Tampa Bay Dr.
83
84 City Wesley Chapel FL 85 Zip Code 33543

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

John Della John Della President 2-10-99
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	D	<input type="checkbox"/> DELETE
NAME	JURCZAK, EDWARD	
STREET ADDRESS	28538 TANGLEWOOD DRIVE	
CITY-ST-ZIP	WESLEY CHAPEL FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	KAMEN, GERALD E.	
STREET ADDRESS	1810 THISTIE CT.	
CITY-ST-ZIP	WESLEY CHAPEL FL	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	FROUMAN, MAX	
STREET ADDRESS	28443 TRIDENT CT.	
CITY-ST-ZIP	WESLEY CHAPEL FL 33543	
TITLE	S	<input type="checkbox"/> DELETE
NAME	ZAYAS, PETER	change
STREET ADDRESS	28506 TWINBROOK LANE	
CITY-ST-ZIP	WESLEY CHAPEL FL 33543	
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	SADOWSKY, CARL	
STREET ADDRESS	28510 TWINBROOK LANE	
CITY-ST-ZIP	WESLEY CHAPEL FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CAREN, JOE	
STREET ADDRESS	28535 TWINBROOK LA.	
CITY-ST-ZIP	WESLEY CHAPEL FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Della John
1.3 STREET ADDRESS	1828 Tampa Bay DR.
1.4 CITY-ST-ZIP	Wesley Chapel FL 33543
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	VP Cluck Mary
2.3 STREET ADDRESS	1901 Tupelo Lane
2.4 CITY-ST-ZIP	Wesley Chapel FL 33543
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Hathaway Jim
3.3 STREET ADDRESS	1936 Twisting Lane
3.4 CITY-ST-ZIP	Wesley Chapel FL 33543
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	S Brown BOB
4.3 STREET ADDRESS	1906 Twisting Lane
4.4 CITY-ST-ZIP	Wesley Chapel FL 33543
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	D Canzoneri Richard
5.3 STREET ADDRESS	1948 Tidewater Court
5.4 CITY-ST-ZIP	Wesley Chapel FL 33543
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	D Cooper Jerry
6.3 STREET ADDRESS	1842 Tampa Bay DR.
6.4 CITY-ST-ZIP	Wesley Chapel FL 33543

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, with all other like empowered.

SIGNATURE: Peter Zayas **PETER ZAYAS - (DIRECTOR)** 2/9/1999
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (11/98)