

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005089

FILED
Apr 24, 2006
Secretary of State

Entity Name: TANGLEWYLDE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

3434 COLWELL AVENUE
SUITE 200
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

3434 COLWELL AVENUE
SUITE 200
TAMPA, FL 33614

New Mailing Address:

FEI Number: 20-1396678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIZZETTA & COMPANY, INC.
3434 COLWELL AVENUE
SUITE 200
TAMPA, FL 33614 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SIFFORD, MARK A
Address: 509 GUI SANDO DE AVILA STE 100
City-St-Zip: TAMPA, FL 336135233

Title: VP () Delete
Name: TOBORG, JOHN
Address: 509 GUI SANDO DE AVILA STE 100
City-St-Zip: TAMPA, FL 336135233

Title: S/T () Delete
Name: BUCK, DONALD
Address: 509 GUI SANDO DE AVILA STE 100
City-St-Zip: TAMPA, FL 336135233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KRAUER, FRED
Address: 3012 TNAGLEWYLDE DR
City-St-Zip: LAND O LAKES, FL 34639

Title: VP (X) Change () Addition
Name: GARDNER, NANCY
Address: 19235 GOPHER TRAIL PLACE
City-St-Zip: LAND O LAKES, FL 34639

Title: S/T (X) Change () Addition
Name: ARROYO, JOSH
Address: 2916 TANGLEWYLDE DR
City-St-Zip: LAND O LAKES, FL 34639

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FREDKRAUER

D-P

04/24/2006

Electronic Signature of Signing Officer or Director

Date