## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05144

FILED Jan 15, 2007 Secretary of State

Entity Name: TANGLEWOOD PROFESSIONAL COMPLEX OWNER'S ASSOCIATION. INC

	me: TANGLE			
Current Principal Place of Business:			New Principal Place of Business:	
2109 59TH BRADENT	H ST W FON, FL 34209	9 US		
Current Mailing Address:			New Mailing Address:	
	HAVENUE DR FON, FL 34205			
FEI Number	: 59-2480617	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
3503 20TH	WILLIAM M HAVE DR W FON, FL 34205	5 US		
	e named entity : e of Florida.	submits this statement for the p	purpose of changing its registere	d office or registered agent, or both,
SIGNATU		ois Oissantine of Demistered Ass		Dete
OFFICER	Electron S AND DIREC	nic Signature of Registered Ag	ent	Date
		TORS:	ADDITIONS/CHANGI	ES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	P ( ) ZAMIKOFF, IR\ 2103 59TH ST BRADENTON, I	) Delete VING W	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip:	ES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition
Name: Address:	ZAMIKOFF, IRV 2103 59TH ST BRADENTON, I	) Delete VING W FL 34209 ) Delete LIAM M E DR W	Title: Name: Address:	ES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition  ( ) Change ( ) Addition

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: WILLIAM M PARENT AGEN 01/15/2007