

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

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**95 APR 26 AM 11:12**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**CORPORATION ANNUAL REPORT 1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N25935 (0)**  
1. Corporation Name  
**RESIDENTS OF TANGLEWOOD ASSOCIATION, INC.**

Principal Place of Business: **3988 RIDGEWOOD DR. TITUSVILLE FL 32796 US**  
Mailing Address: **P. O. BOX 8601 TITUSVILLE FL 32782-0601 US**

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields for address details.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **04/15/1988** 3a. Date of Last Report: **02/25/1994**

4. FEI Number: **59-2949209** 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**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status:  **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 168.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent: **BRESLIN, JAMES G 3988 RIDGEWOOD DR. TITUSVILLE FL 32796**

81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code: **FL**

10. Name and Address of New Registered Agent

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) DATE: \_\_\_\_\_

**12. OFFICERS AND DIRECTORS**

TITLE	<b>P</b>
NAME	<b>PRINGLE, MATT R</b>
STREET ADDRESS	<b>3969 RIDGEWOOD DR.</b>
CITY-ST-ZIP	<b>TITUSVILLE FL</b>
TITLE	<b>ST</b>
NAME	<b>BRESLIN, JAMES G</b>
STREET ADDRESS	<b>3988 RIDGEWOOD DR.</b>
CITY-ST-ZIP	<b>TITUSVILLE FL</b>
TITLE	<b>VP</b>
NAME	<b>MERRIMAN, DAVE</b>
STREET ADDRESS	<b>3971 RIDGEWOOD DR.</b>
CITY-ST-ZIP	<b>TITUSVILLE FL</b>
TITLE	<b>D</b>
NAME	<b>VAN NESS, V.N.</b>
STREET ADDRESS	<b>702 GARDEN STREET, SUITE A</b>
CITY-ST-ZIP	<b>TITUSVILLE FL</b>
TITLE	<b>D</b>
NAME	<b>STEVENS, MICHAEL</b>
STREET ADDRESS	<b>848 TRAILWOOD DRIVE</b>
CITY-ST-ZIP	<b>TITUSVILLE FL</b>
TITLE	<b>D</b>
NAME	<b>SUMLIN, WAYNE C.</b>
STREET ADDRESS	<b>3949 RIDGEWOOD DRIVE</b>
CITY-ST-ZIP	<b>TITUSVILLE FL</b>

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James G Breslin **JAMES G. BRASLIN**  
Date: **20 APR 95**  
Daytime Phone #: **(407) 268 0171**