

FILE NOW: FILING FEE IS \$61.25

4 FILED
Aug 14 1998 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N25935
1. Corporation Name
RESIDENTS OF TANGLEWOOD ASSOCIATION, INC.

Principal Place of Business Mailing Address
3968 RIDGEWOOD DR P.O. BOX 6601
TITUSVILLE FL 32796 TITUSVILLE FL
US 32782-6601
US

21	2. Principal Place of Business	2a	Mailing Address
22	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
23	City & State	27	City & State
24	Zip	28	Country
25	Country	29	Zip
30		30	Country

3. Date Incorporated or Qualified
4-15-88

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. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
 Yes No

9. Name and Address of Current Registered Agent
JAMES G BRESLIN
3968 RIDGEWOOD DR
TITUSVILLE FL 32796

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	P/D MATTHEW R. PRINGLE
STREET ADDRESS		1.3 STREET ADDRESS	3969 RIDGEWOOD DR
CITY-ST-ZIP		1.4 CITY-ST-ZIP	TITUSVILLE FL 32796
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	S/T/D
NAME		2.2 NAME	JAMES G. BRESLIN
STREET ADDRESS		2.3 STREET ADDRESS	3968 RIDGEWOOD DR
CITY-ST-ZIP		2.4 CITY-ST-ZIP	TITUSVILLE FL 32796
TITLE	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	V/D
NAME		3.2 NAME	JOHN GRAVES
STREET ADDRESS		3.3 STREET ADDRESS	3968 TANGLE DRIVE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	TITUSVILLE FL 32796
TITLE	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	500002617955
STREET ADDRESS		6.3 STREET ADDRESS	-08/17/98--01123--022 PE
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***61.25 8-14

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.

SIGNATURE: Matthew R. Pringle 8-5-98 407.861.0992

BLOCK 12 OR 13 IF CHANGED OR ON AN ATTACHMENT WITH AN ADDRESS

CR2E037 (10/97)