

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

FILED
Jan 20, 1998 8:00 am
Secretary of State

DOCUMENT # N25935 (0)

1. Corporation Name

RESIDENTS OF TANGLEWOOD ASSOCIATION, INC.



Principal Place of Business Mailing Address
3968 RIDGEWOOD DR. TITUSVILLE FL 32796 US **P. O. BOX 6601 TITUSVILLE FL 32792-6601 US**

2. Principal Place of Business 2a. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
Zip Country Zip Country

3. Date Incorporated or Qualified **04/15/1988**
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 home owners 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
BRESLIN, JAMES G
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 **FL** 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 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 | P <input type="checkbox"/> DELETE |
| NAME | PRINGLE, MATT R |
| STREET ADDRESS | 3969 RIDGEWOOD DR. |
| CITY-ST-ZIP | TITUSVILLE FL |
| TITLE | ST <input type="checkbox"/> DELETE |
| NAME | BRESLIN, JAMES G |
| STREET ADDRESS | 3968 RIDGEWOOD DR. |
| CITY-ST-ZIP | TITUSVILLE FL |
| TITLE | VP <input type="checkbox"/> DELETE |
| NAME | MERRIMAN, DAVE |
| STREET ADDRESS | 3971 RIDGEWOOD DR. |
| CITY-ST-ZIP | TITUSVILLE FL |
| TITLE | D <input type="checkbox"/> DELETE |
| NAME | VAN NESS, V.N. |
| STREET ADDRESS | 702 GARDEN STREET, SUITE A |
| CITY-ST-ZIP | TITUSVILLE FL |
| TITLE | D <input type="checkbox"/> DELETE |
| NAME | STEVENS, MICHAEL |
| STREET ADDRESS | 848 TRAILWOOD DRIVE |
| CITY-ST-ZIP | TITUSVILLE FL |
| TITLE | D <input type="checkbox"/> DELETE |
| NAME | SUMLIN, WAYNE C. |
| STREET ADDRESS | 3949 RIDGEWOOD DRIVE |
| CITY-ST-ZIP | TITUSVILLE FL |

| 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 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: **JAMES G BRESLIN** **08 JAN 98 (407) 2680171**

CR2E037 (10/97)