

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90300 023 ****70.00

DOCUMENT # N25935

1. Entity Name
RESIDENTS OF TANGLEWOOD ASSOCIATION, INC.



Principal Place of Business
828 PARKWOOD
TITUSVILLE, FL 32796 US

Mailing Address
P. O. BOX 6601
TITUSVILLE, FL 32782-6601 US

J0040010



2. Principal Place of Business
828 Crestwood
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 6601
Suite, Apt. #, etc.

03082005 Chg-NP CR2E037 (10/03)

City & State
Titusville FL

City & State
Titusville FL

4. FEI Number
59-2949209

Applied For
Not Applicable

Zip 32796 **Country** Brevard

Zip 32782 **Country** Brevard

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, LISA
828 PARKWOOD
TITUSVILLE, FL 32796

Name Peggy Ritchie
Street Address (P.O. Box Number is Not Acceptable)
828 Crestwood Dr
City Titusville **FL** **Zip Code** 32796

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SMITH, LISA 828 PARKWOOD TITUSVILLE, FL 32796 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RITCHIE, PEGGY 828 CRESTWOOD TITUSVILLE, FL 32796 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FRANCOEUR, JANE 3958 RIDGEWOOD DR TITUSVILLE, FL 32796 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T VAN FOSSAN, AMANDA 3964 RIDGEWOOD DR. TITUSVILLE, FL 32796 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Peggy Ritchie 828 Crestwood Titusville FL 32796 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Amy Gadapee 946 W. Howland Ave Titusville FL 32796 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Linda Shea 3935 Tangle Titusville FL 32796 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jane Francoeur 3968 Ridgewood Dr Titusville FL 32796 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Vanessa Irizarry 3948 Ridgewood Dr Titusville FL 32796 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Janice Hussey 3968 Tangle Dr Titusville FL 32796 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-8-05 269-4454
Date Daytime Phone #