

2-13-95 B-1123-C  
**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

**CORPORATION  
 ANNUAL REPORT  
 1995**



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

**FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS**

95 FEB 13 PM 12:05

**DOCUMENT # N27550 (5)**  
 1. Corporation Name  
**THE PARK AT TANGLEWOOD LAKES CONDOMINIUM, INC.**

Principal Place of Business Mailing Address  
 721 S.W. 96TH AVE. 721 S.W. 96TH AVE.  
 PEMBROKE PINES FL 33025 PEMBROKE PINES FL 33025

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **07/22/1988** 3a. Date of Last Report **02/18/1994**  
 4. FEI Number **65-0093212** 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. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
 21 **721 S.W. 96th Ave** 26 **721 S.W. 96th Ave**  
 Suite, Apt. #, etc. Suite, Apt. #, etc.  
 22 27  
 City & State City & State  
 23 **Pembroke Pines, Fl** 28 **Pembroke Pines, Fl**  
 Zip Country Zip Country  
 24 **33025** 25 **USA** 29 **33025** 30 **USA**

9. Name and Address of Current Registered Agent  
**SERVAIS, DOLORES**  
**240 SW 95TH TERRACE**  
**PEMBROKE PINES FL 33025**

10. Name and Address of New Registered Agent  
 81 Name **Bill G. Spivey**  
 82 Street Address (P.O. Box Number is Not Acceptable) **211 S.W. 95th Ave**  
 83 **Unit # 106**  
 84 City **Pembroke Pines** FL 85 Zip Code **33025**

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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 **Bill G. Spivey - Vice Pres/ Dir** *Bill G. Spivey* **Feb 3 1995**  
(Signature, typed or printed name of registered agent and title of registration) (NOTE: Registered Agent signature required for non-residents) (DATE)

12. OFFICERS AND DIRECTORS

TITLE	<b>PD</b>
NAME	<b>ZUMWALT, KIMBEL</b>
STREET ADDRESS	<b>151 SW 95TH TERRACE #105</b>
CITY-ST-ZIP	<b>PEMBROKE PINES FL</b>
TITLE	<b>VD</b>
NAME	<b>SERVAIS, DOLORES</b>
STREET ADDRESS	<b>240 S.W. 95TH TERR.</b>
CITY-ST-ZIP	<b>PEMBROKE PINES FL</b>
TITLE	<b>STD</b>
NAME	<b>SANCHEZ, FRANK E.</b>
STREET ADDRESS	<b>721 S.W. 96TH AVE.</b>
CITY-ST-ZIP	<b>PEMBROKE PINES FL</b>
TITLE	<b>D</b>
NAME	<b>GONZALEZ, EDWARD</b>
STREET ADDRESS	<b>211 SW 95TH TERRACE #103</b>
CITY-ST-ZIP	<b>PEMBROKE PINES FL</b>
TITLE	<b>D</b>
NAME	<b>SANCHEZ, MICHAEL</b>
STREET ADDRESS	<b>210 S.W. 95TH TERR.</b>
CITY-ST-ZIP	<b>PEMBROKE PINES FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<b>PD</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	<b>STEIN, SANDRA J.</b>
13 STREET ADDRESS	<b>151 S.W. 95th Terr #102</b>
14 CITY-ST-ZIP	<b>PEMBROKE PINES, FL 33025</b>
21 TITLE	<b>VD</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	<b>SPIVEY, BILL G.</b>
23 STREET ADDRESS	<b>211 S.W. 95th Terr #106</b>
24 CITY-ST-ZIP	<b>PEMBROKE PINES, FL. 33025</b>
31 TITLE	<b>SD</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	<b>RAFORD, GLORIA</b>
33 STREET ADDRESS	<b>151 S.W. 95th Terr #104</b>
34 CITY-ST-ZIP	<b>PEMBROKE PINES, FL. 33025</b>
41 TITLE	<b>TD</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	<b>SANCHEZ, FRANK E.</b>
43 STREET ADDRESS	<b>721 S.W. 96th Ave</b>
44 CITY-ST-ZIP	<b>PEMBROKE PINES, FL. 33025</b>
51 TITLE	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	<b>LEFTWICH, RUBY</b>
53 STREET ADDRESS	<b>151 S.W. 95th Terr.</b>
54 CITY-ST-ZIP	<b>PEMBROKE PINES, FL. 33025</b>
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 119.07(6)(b), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if such officer appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Frank E. Sanchez - Dir** *Frank E. Sanchez* **Jan 25 95** **305-949-9402**  
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) (DATE) (PHONE NUMBER)