FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N43307

Corporation Name

TANGLEWOOD ATHLETIC ASSOCIATION, INC.

Principal Place of Business
P.O. BOX 66
DOCTORS INLET FL 32030-0066

Mailing Address

P.O. BOX 66

DOCTORS INLET FL 32030-0066

FILED Mar 04, 1999 8:00 am § Secretary of State

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	lace of Business	24. Mailing Address			05/03/1991					
Suite Ant	# etc	Suite. Apt. #, etc.			4. FEI Number	Apr	olied For			
Suite, Apt. #, etc.		27	-		59-3045687	Not	Applicable			
City & State	City & State City & State				5 0 00 to 100 to	\$8.75 A	dditional			
23	¬ ` ' ' ` ` ` `			Certificate of Status Desired						
Zip	Country	Zip	Country		6. Election Campaign Financing	\$5.00				
24	25	29 30)		Trust Fund Contribution	Added to	Fees			
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent				
			81	Name	•		ļ			
HALL, FRA	ANK		82							
	ADS COURT									
	OVE SPRINGS FL 32043		83							
32			84	City		85 Zip C	ode			
				•	FL	-				
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 options of, Section 617.0503, Florida Statutes.										
agent. I a	m familiar with, and accept the objection	ons of, Section 617,0503, Florida	a Statutes.	110 001 p0	randing board of another increasy decept and appear		'			
SIGNATURE frankishell Frank Hall 1-14-99										
	Signature, typed or printed name of registeres igent		 	signature re	equired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AI	ND DIRECTO	RS IN 12			
12.	OFFICERS AND		13.			☐ Change	Addition			
TITLE	Р	☐ DELETE	1.1 TITLE	ļ	Persiper	Change	Addition			
NAME	KELSO, ROBERT		1.2 NAME	1	Robber KEISE	,				
STREET ADORESS	2771 FRONTIER AVE.		1.3 STREET	ADDRESS	2771 Focultie QUE 1					
CITY-ST-ZIP	ORANGE PARK FL 32065		1.4 CITY-ST	-ZIP	cearle Paix #1 38048		- Addition			
TITLE	VP	☐ DELETE	2.1 TITLE			Change	Addition			
NAME	Baldwin, Kevin		2.2 NAME	- 1			,			
STREET ADDRESS	1540 MOHAWK COURT		2.3 STREET	ADDRESS	ESS					
CITY-ST-ZIP	ORANGE PARK FL 32065		2.4 CITY-S							
TITLE	D	⊠ DELETE	3.1 TITLE		D. Jan L. Composell	Change	X Addition			
NAME	WHEATLEY, ART		3.2 NAME	1	Robert Campbell 2948 Whirlaway Ct. GreenCove Spgs, FL 320					
STREET ADDRESS	2802 FRONTIER AVENUE		3.3 STREET	ADDRESS	2948 Will laway Ct.	110				
CITY-ST-ZIP	ORANGE PARK FL 32065		3.4 CITY-S	-ZIP	Greencove Spgs, FL Dac	<u> </u>				
TITLE	VPD	DELETE	4.1 TITLE	İ	· V	Change	Addition			
NAME	HAYES, BILLY		4. 2 NAME	1	•					
STREET ADDRESS	2890 GATLING BLVD.		4.3 STREET	ADDRESS		,				
CITY-ST-ZIP	ORANGE PARK FL 32065		4.4 CITY-ST	- ZIP						
TITLE	S	☐ DELETE	5.1 TITLE	ł		Change	☐ Addition			
NAME	HALL, FRANK JR.		5.2 NAME		•					
STREET ADDRESS	3196 CHADS COURT	•	5.3 STREET							
CITY-ST-ZIP	GREEN COVE SPRINGS FL 3204		5.4 CITY-ST	- ZIP	:					
TITLE	T	☐ DELETE	6.1 TITLE	1		☐ Change	Addition			
NAME	PEARCE, MAGGIE		6.2 NAME	1	·					
STREET ADDRESS	1765 SAINT IVES DRIVE		6.3 STREET	ADDRESS						
I	1.000 C0100 E1 4444		0.4.000/.00	-mn						

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, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-1499

1904)272-3163

Daytime Phone #

R2E037 (11/98)