

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43307

FILED  
Apr 28, 2006  
Secretary of State

**Entity Name:** TANGLEWOOD ATHLETIC ASSOCIATION, INC.

**Current Principal Place of Business:**

P.O. BOX 30066  
ORANGE PARK, FL 32065

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 30066  
ORANGE PARK, FL 32065

**New Mailing Address:**

**FEI Number:** 59-3045687

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CARTER, MIKE  
1508 WINSTON LANE  
ORANGE PARK, FL 32003 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CARTER, MIKE  
Address: 1508 WINSTON  
City-St-Zip: ORANGE PARK, FL 32003 US

Title: VP1 ( ) Delete  
Name: SPEER, BILLY  
Address: PO BOX 30066  
City-St-Zip: ORANGE PARK, FL 32003 US

Title: VP 2 ( ) Delete  
Name: ROBINSON, ROBBIE  
Address: PO BOX 30066  
City-St-Zip: ORANGE PARK, FL 32003 US

Title: T ( ) Delete  
Name: CARTER, VICKIE  
Address: 1508 WINSTON LANE  
City-St-Zip: ORANGE PARK, FL 32003

Title: S ( ) Delete  
Name: BROWNING, GWEN  
Address: PO BOX 30066  
City-St-Zip: ORANGE PARK, FL 32065

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIKE CARTER

PRES

04/28/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date