

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N43307

FILED  
Apr 30, 2003  
Secretary of State

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

**Current Principal Place of Business:**

P.O. BOX 66  
DOCTORS INLET, FL 320300066

**New Principal Place of Business:**

P.O. BOX 30066  
ORANGE PARK, FL 32065

**Current Mailing Address:**

P.O. BOX 66  
DOCTORS INLET, FL 320300066

**New Mailing Address:**

P.O. BOX 30066  
ORANGE PARK, FL 32065

**FEI Number:** 59-3045687

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NICHOLS, CHARLES  
1796 WATERBURY LN  
ORANGE PARK, FL 32068 US

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

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

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: MIKE CARTER

04/30/2003

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: NICHOLS, CHARLES  
Address: 1796 WATERBURY LN  
City-St-Zip: ORANGE PARK, FL 32003

Title: VPD ( ) Delete  
Name: NOLAN, JEFF  
Address: 1737 ST. IVES DR.  
City-St-Zip: MIDDLEBURG, FL 32068

Title: VPD (X) Delete  
Name: STAWNICY, PAUL  
Address: 1293 LARAMIE CT.  
City-St-Zip: ORANGE PARK, FL 32065

Title: S ( ) Delete  
Name: WOODWARD, PENNY  
Address: 2040 WELLS RD. #1-H  
City-St-Zip: ORANGE PARK, FL 32073

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

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

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

Title: P (X) Change ( ) Addition  
Name: MODLIN, TEDDY  
Address: P.O. BOX 687  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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 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 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

T

04/30/2003

Electronic Signature of Signing Officer or Director

Date