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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # **N94000001301 (0)**

1. Corporation Name
TANGERINE TRAILS HOMEOWNERS ASSOCIATION 4, INC.

Principal Place of Business	Mailing Address
C/O RAMON E GRIGGS 1485 SHOREWOOD DRIVE LAKELAND FL 33803 US	C/O RAMON E GRIGGS 1485 SHOREWOOD DRIVE LAKELAND FL 33803 US

3. Date Incorporated or Qualified: 03/11/1994

4. FEI Number: NOT APPLICABLE — [X] Applied For [X] Not Applicable

2. Principal Place of Business 21 REX SCHULZ	2a. Mailing Address 26 REX SCHULZ
Suite, Apt. #, etc. 22 7963 BENJAMIN DRIVE	Suite, Apt. #, etc. 27 7963 BENJAMIN DRIVE
City & State 23 LAKELAND FL 33810	City & State 28 LAKELAND FL 33810
Zip / Country 24 33810 / 25 US	Zip / Country 29 33810 / 30 US

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. Is this nonprofit corporation a homeowners association? [X] Yes [ ] No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. [ ] Yes [X] No

9. Name and Address of Current Registered Agent

GRIGGS, RAMON E
1485 SHOREWOOD DRIVE
LAKELAND FL 33803

10. Name and Address of New Registered Agent

31 Name: REX SCHULZ
32 Street Address (P.O. Box Number is Not Acceptable): 7963 BENJAMIN DRIVE
33
34 City: LAKELAND FL 35 Zip Code: 33810

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 obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: R. Schulz Jr. 4-24-98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PVST GRIGGS, RAMON E 1485 SHOREWOOD DRIVE LAKELAND FL	[X] DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD REX SCHULZ 7963 BENJAMIN DRIVE LAKELAND FL 33810	[X] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRIGGS, RAMON E 1485 SHOREWOOD DRIVE LAKELAND FL	[X] DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VD GREGORY ABRAMS 7942 KAITLAND CIRCLE LAKELAND FL 33810	[X] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRIGGS, EILEEN C 1485 SHOREWOOD DRIVE LAKELAND FL	[X] DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	SD KIM HICKS 7920 KAITLAND CIRCLE LAKELAND FL 33810	[X] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRIGGS, JEFFREY R 6245 TROI LANE LAKELAND FL	[X] DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	TD ROBERT ASHER 7947 BENJAMIN DRIVE LAKELAND FL 33810	[X] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	THOMAS P. MURPHY D 8053 KAITLAND CIRCLE LAKELAND FL 33810	[ ] Change [X] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		[ ] Change [ ] Addition

CR2E037 (10/97)

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.

SIGNATURE: R. Schulz Jr. REX SCHULZ 4-13-98 (941) 859-4467