

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90009 002 ****61.25

DOCUMENT # N94000001301

1. Entity Name

TANGERINE TRAILS NORTH HOMEOWNERS ASSOCIATION IN C.

Principal Place of Business

Mailing Address

DOUGLAS LINDSAY
8057 KAITLIN CIRCLE
LAKELAND FL 33810-5147
US

DOUGLAS LINDSAY
8057 KAITLIN CIRCLE
LAKELAND FL 33810-5147
US

2. Principal Place of Business

8037 Kaitlin Circle

3. Mailing Address

8037 Kaitlin Circle

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lakeland, FL

City & State

Lakeland, FL

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

33810-5147 USA

Zip

Country

33810-5147 USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

LINDSAY, DOUGLAS
8037 KAITLIN CIRCLE
LAKELAND FL 33810-5147

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LINDSAY, DOUGLAS 8037 KAITLIN CIRCLE LAKELAND FL 33810	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ASHER, ROBERT 7947 BENJAMIN DRIVE LAKELAND FL 33810	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CANDACE, EICK 7951 BENJAMIN DR. LAKELAND FL 33810	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MURPHY, THOMAS 8053 KAITLIN CIRCLE LAKELAND FL 33810	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MIKOLON, MARK 8015 KAITLIN CIR. LAKELAND FL 33810	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHULTZ, REX 7963 BENJAMIN DR LAKELAND FL 33810	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Schulz, Rex 7963 Benjamin Drive. Lakeland, FL 33810	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Murphy, Thomas 8053 Kaitlin Circle Lakeland, FL 33810	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Roush, Tonna 7968 Benjamin Drive Lakeland, FL 33810	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Eick, Candace 7951 Benjamin Drive. Lakeland, FL 33810	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Spurgeon, Scott 8047 Kaitlin Circle Lakeland, FL 33810	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Douglas Roush
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/02

(863) 687-2511

CR2E037 (9/01)

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