NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2003 8:00 am
Secretary of State
04-03-2003 90143 032 ****61.25

DOCUMENT # N94000001301

1. Entity Name
Tangerine Trails North Homeowners Association Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
8037 Kaitlin Circle	8037 Kaitlin Circle
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Lakeland, FL	City & State: Lakeland, FL
Zip: 33810-5147 Country: USA	Zip: 33810-5147 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: N/A — ☐ Applied For ☑ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Lindsay, Douglas
Street Address (P.O. Box Number is Not Acceptable): 8037 Kaitlin Circle
City: Lakeland FL Zip Code: 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FEE IS $61.25
Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P/D
NAME	Lindsay, Douglas
STREET ADDRESS	8037 Kaitlin Circle
CITY-ST-ZIP	Lakeland, FL 33810
TITLE	V/D
NAME	Preston, Jeffrey
STREET ADDRESS	7990 Benjamin Drive
CITY-ST-ZIP	Lakeland, FL 33810
TITLE	S/D
NAME	Murphy, Thomas
STREET ADDRESS	8053 Kaitlin Circle
CITY-ST-ZIP	Lakeland, FL 33810
TITLE	T/D
NAME	Ohrmund, Mary
STREET ADDRESS	7943 Benjamin Drive
CITY-ST-ZIP	Lakeland, FL 33810
TITLE	D
NAME	Eick, Candace
STREET ADDRESS	7951 Benjamin Drive.
CITY-ST-ZIP	Lakeland, FL 33810
TITLE	D
NAME	Mikolon, Mark
STREET ADDRESS	8015 Kaitlin Circle.
CITY-ST-ZIP	Lakeland, FL 33810

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CR2E037B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Douglas R Lindsay Douglas R. Lindsay 4/1/03 (863)687-2511
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment

S00070219
N94000001301

Line 10. (cont)

Title	D
Name	Elder, Kitty
St Address	7908 Kaitlin Circle.
City-St-Zip	Lakeland, FL 33810