


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N97000006035		
1. Entity Name TANGELO PARK GOLDEN STAR SENIOR CITIZEN CLUB OF ORLANDO, FLORIDA, INC.		
Principal Place of Business TANGELO BAPTIST CH 7001 RAVENNA AVE ORLANDO, FL 32819 US	Mailing Address 7001 RAVENNA AVE ORLANDO, FL 32819 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent GAINES, MYLVETTE 4906 MANAUTIA ST ORLANDO, FL 32819		
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 _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____		
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MOTEN, JAMES 5107 POLARIS ST ORLANDO, FL 32819	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CLAYTON, ADELLE 4920 BIOHORN STREET ORLANDO, FL 32819	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DENMARK, HELEN C 7715 NECTAR DR ORLANDO, FL 32819	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WHITE, PAULINE 7701 MANDARIN FRIVE ORLANDO, FL 32819	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Mylvette Gaines</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		

FILED
Feb 19, 2007 08:00 AM
Secretary of State



01252007 No Chg-NP CR2E037 (4/06)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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03/01/07-80038-002 61.25

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