

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2003 8:00 am
Secretary of State

04-09-2003 90142 043 ****61.25

DOCUMENT # N99000006793

1. Entity Name
TANGLEWOOD HOMEOWNERS ASSOCIATION OF FORT PIERCE, INC.



Principal Place of Business
**345 E. WEATHERBEE ROAD. LOT 1
FT. PIERCE FL 34982**

Mailing Address
**345 E. WEATHERBEE ROAD. LOT 1
FT. PIERCE FL 34982**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0970910**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ELLIOTT, BRUCE
345 E. WEATHERBEE ROAD, LOT 1
FT. PIERCE FL 34982**

Name

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

City

FL

Zip Code

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

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	WULF, EDWARD	
STREET ADDRESS	345 WEATHERBEE RD LOT #64	
CITY-ST-ZIP	FORT PIERCE FL 34982	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	ELLIOTT, DANA	
STREET ADDRESS	345 WEATHERBEE RD LOT #1	
CITY-ST-ZIP	FORT PIERCE FL 34982	
TITLE	S	<input type="checkbox"/> Delete
NAME	CALLAHAN, KIM	
STREET ADDRESS	345 WEATHERBEE RD LOT #53	
CITY-ST-ZIP	FORT PIERCE FL 34982	
TITLE	T	<input type="checkbox"/> Delete
NAME	HANLON, SHIRLEY	
STREET ADDRESS	345 WEATHERBEE RD LOT #63	
CITY-ST-ZIP	FORT PIERCE FL 34982	
TITLE	TR	<input type="checkbox"/> Delete
NAME	HANLON, JAMES	
STREET ADDRESS	345 WEATHERBEE RD LOT #133	
CITY-ST-ZIP	FORT PIERCE FL 34982	
TITLE	TR	<input type="checkbox"/> Delete
NAME	HICKS, CHARLES	
STREET ADDRESS	345 WEATHERBEE RD LOT #124	
CITY-ST-ZIP	FORT PIERCE FL 34982	

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELLIOTT, Bruce	
STREET ADDRESS	345 Weatherbee Rd Lot #1	
CITY-ST-ZIP	FORT PIERCE, FL 34982	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dennis, Edie	
STREET ADDRESS	345 Weatherbee Rd. Lot #95	
CITY-ST-ZIP	FORT PIERCE, FL 34982	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANLON, James	
STREET ADDRESS	345 Weatherbee Rd. Lot #63	
CITY-ST-ZIP	FORT PIERCE, FL 34982	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: **BRUCE ELLIOTT**

4-09-03 465-0740

CR2E037 (10/02)