

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 13, 2006 8:00 am
Secretary of State

04-24-2006 90462 041 ***150.00

DOCUMENT # P05000093679

1. Entity Name
TANGIBLE PROPERTY TAX SERVICES, INC.



Principal Place of Business Mailing Address

380 S. STATE ROAD 434 **380 S. STATE ROAD 434**
SUITE 1004, #399 **SUITE 1004, #399**
ALTAMONTE SPRINGS FL 32714 **ALTAMONTE SPRINGS FL 32714**

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
65-1257647 Applied For
 Not Applicable

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

1st MOORE CR2E034 (10/05)



6. Name and Address of Current Registered Agent

SWINDLE, SHERRI
4911 EDEN VIEW CT.
ORLANDO FL 32810

7. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and life if applicable (NOTE: Registered Agent signature required when nominating)

FILE NOW!!! FEE IS \$150.00.
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 607, 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: Sherril Swindle Sherril Swindle 3-6-06 407-290-6782
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



ATTACHMENT

66021774

Tangible Property Tax Services, Inc.

July 3, 2006

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: TANGIBLE PROPERTY TAX SERVICES, INC.
REF NUMBER: P05000093679

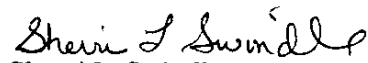
Dear Sir/Madame:

Attached please find the corrected copies of the documents you requested for the above reference number.

I didn't check my mailbox until June 28 and was not aware of the 30 day deadline approaching so I wanted to amend this as soon as possible and appreciate your assistance in granting me the additional response time.

Thank you for our assistance in this matter.

Sincerely,


Sherri L. Swindle

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