

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000018882

Entity Name: TANGLEWOOD OAKS, INC.

FILED  
Apr 12, 2012  
Secretary of State

## Current Principal Place of Business:

1389 IVAN BOULEVARD  
LABELLE, FL 33935

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 460  
LABELLE, FL 33975

## New Mailing Address:

1389 IVAN BOULEVARD  
LABELLE, FL 33935

FEI Number: 65-0898778

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARCOTTE, WILLIAM A  
1389 IVAN BLVD  
LABELLE, FL 33935 US

## Name and Address of New Registered Agent:

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: TD  
Name: POLHILL, FRANK  
Address: 497 CALOOSA ESTATES DR.  
City-St-Zip: LABELLE, FL 33935 US

Title: SD  
Name: MILLER, DAVID N  
Address: 670 WASHINGTON AVE.  
City-St-Zip: LABELLE, FL 33935 US

Title: PD  
Name: MARCOTTE, WILLIAM A  
Address: 1389 IVAN BLVD  
City-St-Zip: LABELLE, FL 33935 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM A MARCOTTE

PD

04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date