2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741551

FILED Mar 17, 2009 Secretary of State

Entity Name: TANGLEWOOD MOBILE VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

3309 CHANNING DRIVE HOLIDAY, FL 34690

Current Mailing Address:

New Mailing Address:

3309 CHANNING DRIVE HOLIDAY, FL 34690

QUALIFIED PROPERTY MANAGEMENT, INC 5901 US 19 SUITE 7Q

NEW PORT RICHEY, FL

FEI Number: 59-1819458 FEI Number Applied For () FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ELZERMAN, LARRY 3327 CHARFORD DRIVE HOLIDAY, FL 34690

QUALIFIED PROPERTY MANAGEMENT, INC 3327 CHARFORD DRIVE HOLIDAY, FL 34690

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: MARY WHITE

03/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete GERARDI, CHERYL Name: Address:

3041 BUCKNER CT

City-St-Zip: HOLIDAY, FL 34690

Title: () Delete BALLIET, ROBERT Name: Address: 3227 HAMSHIRE DR City-St-Zip: HOLIDAY, FL 34690

Title: () Delete KUHN, LESLIE Name: 3235 NANTUCKET DR Address: City-St-Zip: HOLIDAY, FL 34690

Title: () Delete Name: KREUSER, JOHN 3039 BUCKNER CT Address: City-St-Zip: HOLIDAY, FL 34690

Title: () Delete CORT, HARRY Name: 3250 LANARK DR Address: City-St-Zip: HOLIDAY, FL 34690

(X) Change () Addition

WHITE, LINDA Name:

Address: 5901 US 19 SUITE 7Q

City-St-Zip: NEW PORT RICHEY, FL 34562

Title: (X) Change () Addition

Name: HOSKIN, ALAN Address: 5901 US 19 SUITE 7Q

City-St-Zip: NEW PORT RICHEY, FL 34652

Title: (X) Change () Addition

RISPOLI, ELVIRA Name: 5901 US 19 SUITE 7Q Address:

City-St-Zip: NEW PORT RICHEY, FL 34652

Title: (X) Change () Addition

LENTZ, GREG Name:

Address: 5901 US 19 SUITE 7Q

City-St-Zip: NEW PORT RICHEY, FL 34652

Title: (X) Change () Addition

HILLMAN, MARY Name: 5901 US 19 SUITE 7Q Address: NEW PORT RICHEY, FL 34652 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY WHITE **AGEN** 03/17/2009