2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#761868

FILED Feb 21, 2009 Secretary of State

Entity Name: TAMARAC GARDENS CONDOMINIUM NO. 2 ASSOCIATION INC.

Current Principal Place of Business: New Principal Place of Business: 9835 N.W. 68TH PL US TAMARAC, FL 33321 **Current Mailing Address: New Mailing Address:** C/O CASLTE GROUP C/O CASTLE GROUP PO BOX 559009 PO BOX 559009 FORT LAUDERDALE, FL 333559009 US FORT LAUDERDALE, FL 33355 US FEI Number: 59-2267896 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: THE LAW OFFICES OF KATZMAN & KORR, P.A. 1501 NORTHWEST 49TH STREET SUITE 202 FORT LAUDERDALE, FL 33309 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CURE, JOAN Name: Name: 9920 NW 68TH PL Address: Address: TAMARAC, FL 33321 City-St-Zip: City-St-Zip: Title: VD () Delete Title: VD (X) Change () Addition BACKMAN, PHILIP Name: MADAN, KRISHNA Name: Address: 9920 NW 68TH PL #210 Address: 9920 NW 68TH PL #113 City-St-Zip: TAMARAC, FL 33321 City-St-Zip: TAMARAC, FL 33321 Title: () Delete Title: (X) Change () Addition CIPRIANO, PHYLLIS CIPRIANO, FELICIA Name: Name: 9920 NW 68 PLACE #114 9920 NW 68 PLACE #114 Address: Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: TAMARAC, FL 33321 Title: (X) Delete Title: () Change () Addition Name: MADAN, KRISHNA Name: 9920 NW 68TH PLACE #113 Address: Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: Title: Title: () Delete () Change () Addition SIEGEL, ROBERT Name: Name: 9920 NE 68TH PLACE 102 Address: Address: City-St-Zip: TAMARAC, FL 33321 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: ROBERT A DONNELLY MGR 02/21/2009