

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000083026

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** COMMUNITY ASSOCIATION MANAGEMENT SERVICES, LLC

**Current Principal Place of Business:**

2002 N LOIS AVE  
SUITE 507  
TAMPA, FL 33607 US

**New Principal Place of Business:**

**Current Mailing Address:**

2002 N LOIS AVE  
SUITE 507  
TAMPA, FL 33607 US

**New Mailing Address:**

**FEI Number:** 20-1888853

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LAMB, BRIAN K  
2002 N LOIS AVE  
SUITE 507  
TAMPA, FL 33607 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

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: LAMB, BRIAN K  
Address: 2002 N LOIS AVE, STE 507  
City-St-Zip: TAMPA, FL 33607

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRIAN K. LAMB

P

01/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date