

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008286

FILED
Apr 28, 2008
Secretary of State

Entity Name: TANGLEWOOD PRESERVE PHASES 2 AND 3 HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1410 NORTH WESTSHORE BLVD.
SUITE 600
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

1410 NORTH WESTSHORE BLVD.
SUITE 600
TAMPA, FL 33607

New Mailing Address:

FEI Number: 20-4398414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARVER, CHARLES H
2907 BAY TO BAY BOULEVARD
SUITE 201
TAMPA, FL 33629 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: D () Delete
Name: ROCHE, MICHAEL
Address: 1410 NORTH WESTSHORE BLVD. SUITE 600
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: LEATHAM, RICHARD
Address: 1410 NORTH WESTSHORE BLVD. SUITE 600
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: DENNIS, TIM
Address: 1410 NORTH WESTSHORE BLVD. SUITE 600
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: RENY, JOHN
Address: 2450 MAITLAND CENTER PKWY STE 301
City-St-Zip: MAITLAND, FL 34786 US

Title: MGR (X) Change () Addition
Name: GEHRHARDT, MARY
Address: 2450 MAITLAND CENTER PKWY STE 301
City-St-Zip: MAITLAND, FL 34786 US

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 GEHRHARDT

MGR

04/28/2008

Electronic Signature of Signing Officer or Director

Date