2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008286

FILED Mar 19, 2009 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

1410 NORTH WESTSHORE BLVD. 2002 N. LOIS AVE SUITE 600 SUITE 507 TAMPA, FL 33607 TAMPA, FL 33607

Current Mailing Address: New Mailing Address:

 1410 NORTH WESTSHORE BLVD.
 2002 N. LOIS AVE

 SUITE 600
 SUITE 507

 TAMPA, FL 33607
 TAMPA, FL 33607

FEI Number: 26-3616626 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:

CARVER, CHARLES H

2907 BAY TO BAY BOULEVARD

SUITE 201

TAMPA, FL 33629 US

COMMUNITY ASSOCIATION MANAGEMENT SVCS
2002 N. LOIS AVE
SUITE 507
TAMPA, FL 33607 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: BRIAN K. LAMB 03/19/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: D () Delete Title: P (X) Change () Addition

 Name:
 ROCHE, MICHAEL
 Name:
 SHAKESPEARE, PAUL

 Address:
 1410 NORTH WESTSHORE BLVD. SUITE 600
 Address:
 4700 MILLENIA BLVD, #175

 City-St-Zip:
 TAMPA, FL 33607
 City-St-Zip:
 ORLANDO, FL 32839

Title: MGR () Delete Title: S (X) Change () Addition

Name: RENY, JOHN Name: MIKLOS, JOHN

 Address:
 2450 MAITLAND CENTER PKWY STE 301
 Address:
 4700 MILLENIA BLVD, #175

 City-St-Zip:
 MAITLAND, FL 34786 US
 City-St-Zip:
 ORLANDO, FL 32839 US

Title: MGR () Delete Title: T (X) Change () Addition

Name: GEHRHARDT, MARY Name: GALLETTI, JOE

 Address:
 2450 MAITLAND CENTER PKWY STE 301
 Address:
 4700 MILLENIA BLVD, #175

 City-St-Zip:
 MAITLAND, FL 34786 US
 City-St-Zip:
 ORLANDO, FL 32839 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: BRIAN K. LAMB CEO 03/19/2009