2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707705

FILED Feb 23, 2009 Secretary of State

Entity Name: THE CAMBRIDGE CONDOMINIUM ASSOCIATION, INC.

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

1710 SOUTH OCEAN BOULEVARD DELRAY BEACH, FL 33483

Current Mailing Address: New Mailing Address:

1710 SOUTH OCEAN BOULEVARD
DELRAY BEACH, FL 33483 US
1710 SOUTH OCEAN BOULEVARD
DELRAY BEACH, FL 33483

FEI Number: 65-0692546 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MANTOV, PETER J PRESIDE
1710 SOUTH OCEAN BLVD
APT 1 NORTH
DELRAY BEACH, FL 33483 US

MANTOV, PETER J PRESIDE
1710 SOUTH OCEAN BLVD
APT 1 NORTH
DELRAY BEACH, FL 33483 US

DELRAY BEACH, FL 33483 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: JOYCE BENNETT 02/23/2009

Electronic Signature of Registered Agent Date

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

Title: STD () Delete Title: () Change () Addition

Name: BENNETT, JOYCE Name:

 Address:
 1710 S OCEAN BLVD., APT. 1 SOUTH
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33483
 City-St-Zip:

Title: PD () Delete Title: () Change () Addition

 Name:
 MANTOVI, PETER
 Name:

 Address:
 1710 S OCEAN BLVD APT 1 NORTH
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33483
 City-St-Zip:

Title: VD () Delete Title: () Change () Addition

 Name:
 KANE, SHIRLEY
 Name:

 Address:
 1710 S OCEAN BLVD APT 3NORTH
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33483
 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: JOYCE BENNETT TREA 02/23/2009