

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 10, 2005 8:00 am
Secretary of State

03-10-2005 90131 047 ****61.25

DOCUMENT # 716167

1. Entity Name

CAMBERWELL CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

11800 AVENUE OF P.G.A.
PALM BEACH GARDENS FL 33418

Mailing Address

11800 AVENUE OF P.G.A.
11800 AVENUE OF P.G.A #1
PALM BEACH GARDENS FL 33418
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1464573

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



1st MOORE

CR2E037 (10/04)

6. Name and Address of Current Registered Agent

GLENNON, THOMAS F
11800 AVE OF THE PGA APT 1
PALM BEACH GARDENS FL 33418

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME GLENNON, THOMAS F ☐ Delete
STREET ADDRESS 11800 AVE OF THE PGA #1
CITY-ST-ZIP PALM BEACH GARDENS FL 33418

TITLE TD
NAME GRISPI, SHIRLEY ☒ Delete
STREET ADDRESS 11800 AVE OF THE PGA, #20
CITY-ST-ZIP PALM BCH GRDNS FL 33418

TITLE VPD
NAME GLENNON, VALERIE ☐ Delete
STREET ADDRESS 11800 AVE. OF THE PGA #1
CITY-ST-ZIP PALM BCH.GARDENS FL 33418

TITLE SD
NAME HUGHES, DONNA ☐ Delete
STREET ADDRESS 11800 AVE OF THE PGA, #7
CITY-ST-ZIP PALM BCH.GARDENS FL 33418

TITLE D
NAME CLEAVER, JERRY ☒ Delete
STREET ADDRESS 11800 AVE OF THE PGA #4
CITY-ST-ZIP PALM BEACH GARDENS FL 33418

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE TD ☐ Change ☒ Addition
NAME GEORGE THOMAS
STREET ADDRESS 11800 AVE OF THE PGA #5
CITY-ST-ZIP PALM BEACH GARDENS FL 33418

TITLE D ☐ Change ☒ Addition
NAME JO ANN THOMAS
STREET ADDRESS 11800 AVE OF THE PGA #5
CITY-ST-ZIP PALM BEACH GARDENS, FL 33418

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS F. GLENNON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/22/05