

FILE NOW: FILING FEE IS \$61.25

FILED  
May 18 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N00425 (1)  
1. Corporation Name  
CAMBRIDGE J CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 1904 CLUBHOUSE DRIVE, SUN CITY CENTER FL 33573-4351  
Mailing Address: 1904 CLUBHOUSE DRIVE, SUN CITY CENTER FL 33573-4351

3. Date Incorporated or Qualified: 12/16/1983  
4. FEI Number: 59-2142972  
Applied For: Not Applicable

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)  
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
7. Is this nonprofit corporation a homeowners association?  Yes  No  
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
GREENE, ROBERT E.  
FLORIDA LIFESTYLE MANAGEMENT  
1904 CLUBHOUSE DRIVE  
SUN CITY CENTER FL 33573

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D WOODLEY, DOUGLAS 102 CAMBRIDGE TR., #219 SUN CITY CENTER FL	1.1 TITLE	PD GRAW, CHARLES 102 CAMBRIDGE TRAIL #232 SUN CITY CENTER FL
NAME	WILLENKIN, GERRY 102 CAMBRIDGE TR., #J-240 SUN CITY CTR, FL 00000	2.1 TITLE	
STREET ADDRESS	TD BLOCK, DORIS 102 CAMBRIDGE TR., @230 SUN CITY CENTER FL	2.2 NAME	
CITY-ST-ZIP	D MANNING, BRUCE 102 CAMBRIDGE TR., #J-217 SUN CITY CENTER FL 33573	2.3 STREET ADDRESS	
	SD WOODLEY, JUNE 102 CAMBRIDGE TRAIL, J219 SUN CITY CENTER FL	2.4 CITY-ST-ZIP	
	VD FRIEDMAN, AMY 102 CAMBRIDGE TRAIL, J221 SUN CITY CENTER FL	3.1 TITLE	STD
		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
		4.1 TITLE	
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
		5.1 TITLE	D CHAPMAN, DUANE 102 CAMBRIDGE TRAIL #228 SUN CITY CENTER FL
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
		6.1 TITLE	
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Charles W. Graw* Feb. 27, '98 634-3819  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAYTIME PHONE # 0047378

CR2E037 (10/97)