

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **N38779** (7)
1. Corporation Name
CAMBRIDGE C CV CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
% HELEN GOLDSTEIN
CAMBRIDGE C APT.C-67, CENTURY VILLAGE
W. PALM BEACH FL 33417

3. Date Incorporated or Qualified **06/22/1990** 3a. Date of Last Report **05/01/1995**
4. FEI Number **59-1641522** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

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

9. Name and Address of Current Registered Agent
FORMAN, ADELE
CAMBRIDGE C65
CENTURY VILLAGE
W. PALM BEACH FL 33417

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 officer 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

TITILE	T	<input type="checkbox"/> DELETE
NAME	WELGOREN., PAUL	
STREET ADDRESS	CAMBRIDGE C 67	
CITY-ST-ZIP	W. PALM BEACH FL	
TITILE	TD	<input type="checkbox"/> DELETE
NAME	METTER., ROSE	
STREET ADDRESS	CAMBRIDGE C 61X	
CITY-ST-ZIP	W.P.B. FL 33417	
TITILE	D	<input type="checkbox"/> DELETE
NAME	GERBER, RUTH	
STREET ADDRESS	CAMBRIDGE C66	
CITY-ST-ZIP	W. PALM BEACH FL	
TITILE	D	<input type="checkbox"/> DELETE
NAME	BRANDT, SYLVIA	
STREET ADDRESS	CMABRIDGE C60	
CITY-ST-ZIP	W. PALM BEACH FL	
TITILE	SD	<input type="checkbox"/> DELETE
NAME	FORMAN, ADELE	
STREET ADDRESS	CAMBRIDGE C-65	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITILE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Sylvia BRANDT
1.3 STREET ADDRESS	60 CAMBRIDGE C
1.4 CITY-ST-ZIP	W. PALM BEACH FL
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Ruth Gerber
2.3 STREET ADDRESS	61 CAMBRIDGE C
2.4 CITY-ST-ZIP	W.P.B. FL
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Helen Goldstein
3.3 STREET ADDRESS	67 Cambridge C
3.4 CITY-ST-ZIP	W.P.B. FL
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Sylvia Brandt** Date **3/1/96** Filing Phone **654-9040**

CR2E037 (12/95)