FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

730772

(1)

CAMBRIDGE "E" CONDOMINIUM ASSOCIATION, INC.

FILED									
Mar 31 1998 8:00am									
Secretary of State									

Oranidi	IIDAE E GONDOMINION	AOGOCIATION, IIVO							
Principal Place of Business Mailing Ad		Mailing Address				1 108111 1E90E 11111 08111 10011 1901	4.5 4.6 4.6	61841 G1811 G1911	1881
DEERFIELD BEACH FL 33442 DEER		CAMBRIDGE "E" #1112 CV	AMBRIDGE "E" #1112 CVE			3. Date incorporated or Qualified	 J		
		DEERFIELD BEACH FL 33442 US				09/24/1974			
		03				4. FEI Number		Applied F	
		TA: 14 19 1 1 1 1	<u> </u>			<u>59-1889430</u>		Not Appli	
	lace of Business	2a. Mailing Address				5. Certificate of Status Desired		3.75 Addition	
Suite, Apt.	# etc	Suite, Apt. #, etc.				6. Election Campaign Financing		Fee Required .00 May Be	
22		27			'	Trust Fund Contribution		ded to Fees	
City & State		City & State				7. Is this nonprofit corporation a l	homeowners ass	oclation?	
23		28				· · · · · · · · · · · · · · · · · · ·	Yes No		
Zip	Country	Zip	Country	У		8. This corporation owes or has p			3
24	25	29	30			Personal Property Tax due Jur Name and Address of New P		77	
	9. Name and Address of Curre	nt negistered Agent	81	Name		V. Maille and Address of New P	indistaled whell	,	
000000	AMILIA OLALIZA	ON OF OPHITHDY	Ĺ						
	MINIUM OWNERS ORGANIZATIO : East, inc.	IN UP CENTURY	82	Street	Address	(P.O. Box Number is Not Accept	able)		
1	EST DRIVE		83	1					
	ELD BEACH FL 33442-2085		-	-			lac	7in Codo	
1			84	"			FL 85	Zip Code	
11. Pursuant	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 617.1508, Florida Statut	es, the abov	e-named	corpora	tion submits this statement for the	purpose of chan	ging its regist	tered
agent. I a	egistered agent, or both, in the State m familiar with, and accept the oblig	ations of, Section 617.0503, Fl	orida Statute	y ine con 8.	POLETION	s board or directors, I hereby acc	epi trie appointm	an as registe	,ieu
SIGNATURE .									
12,	Signature, typed or printed name of registered ag	pent and title if applicable. (NOT ND DIRECTORS	E: Registered Ag	eni signature	s required wi	tion reinstating) ADDITIONS/CHANGES TO OFF	DATE	CTORS IN 1	2
TITLE	PD OFFICERS AN	DELETE	1.1 TITLE		D	ADDITIONO/OFFANGES TO OFF			ddition
NAME	GREENBERG, IRVING		1.2 NAME		1400	HHOUSER RACHEL		• —	
STREET ADDRESS	1102 CAMBRIDGE E			T ADDRESS	1103	CAMBRIDGE E			
CITY-ST-ZIP	DEERFIELD BEACH FL		1.4 CITY-	ST-ZIP	DEER	FIELD BEACH FL			
TITLE	TD	DELETE	2.1 TITLE				C	hange A	ddition
NAME	GOLDBERG, ESTELLE		2.2 NAME						
STREET ADDRESS	1112 CAMBRIDGE-E		2.3 STREE	T ADDRESS					
CITY-ST-ZIP	DEERFIELD BEACH FL	2.		ST-ZIP	<u> </u>				
TITLE	DVP	DELETE	3.1 TITLE	•				hange 🔲 A	ddition
NAME	FREEDMAN, JOSEPH		3.2 NAME						
STREET ADDRESS	2112 CAMBRIDGE - E		3.3 STREE	T ADDRESS					
CITY-ST-ZIP	<u>D</u> EERFIELD FL		3.4. CITY-	ST-ZIP	<u> </u>				
TITLE	D#9	☐ DELETE	4.1 TITLE				L. 0	hange L A	ddition
NAME	LIPKIN, CARL		4. 2 NAME						
STREET ADDRESS	4111 CAMBRIDGE E.			T ADDRESS					ĺ
CITY-ST-ZIP	DEERFIELD BEACH FL	☐ DELETE	4.4 CiTY-	ST-ZIP	 			hanna Ta	dditlon
TITLE	SD OUR DEDO DETTY	☐) nerei¢	5.1 TITLE			1000024 -04/01/98010	に与ごさ む 199010	uouto imiya	DUNIUT1
NAME NAME	DULBERG, BETTY		5.2 NAME	T ADDRESS		***15006.25	122010		i
STREET ADDRESS	3104 CAMBRIDGE E					***10UUD.∠0			;
CITY-ST-ZIP	DEERFIELD BEACH FL	DELETE	5.4 CITY-	31-ZIF	 		Пс	hange A	ddition
NAME	D Goldfarb, Joseph		6.2 NAME					~ ~	
STREET ADDRESS	4120 CAMBRIDGE-E			T ADDRESS				Ye .	
CITY. ST. 7IP	DEEREIELD REACH EL		6.4 CITY-					3.7	

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.

1/13/98

954-426-0675