

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731295

Entity Name: CAMBRIDGE "F" CONDONINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3124 CAMBRIDGE F
DEERFIELD BEACH, FL 33442

Current Mailing Address:

2101 CENTREPARK W DR #110
WEST PALM BEACH, FL 33409 US

FEI Number: 59-1906118

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SEACREST SERVICES
2101 CENTREPARK W DR
SUITE 110
DEERFIELD BEACH, FL 33409 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: JAMES MCLEAR

01/29/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name CAPLAN, LINN
Address 3124 CAMBRIDGE F
City-State-Zip: DEERFIELD BEACH FL 33442

Title TREASURER
Name CLOUTHIER, LOUISE
Address 1134 CAMBRIDGE F
City-State-Zip: DEERFIELD BEACH FL 33442

Title SECRETARY
Name DENIS, MADELINE
Address 4127 CAMBRIDGE F
City-State-Zip: DEERFIELD BEACH FL 33442

Title DIRECTOR
Name CARON, DANIEL
Address 4139 CAMBRIDGE F
City-State-Zip: DEERFIELD BEACH FL 33442

Title DIRECTOR
Name MCCALLUM, MADELINE
Address 1127 CAMBRIDGE F
City-State-Zip: DEERFIELD BEACH FL 33442

Title DIRECTOR, VP
Name YVES CLICHE, JEAN
Address 4137 CAMBRIDGE F
City-State-Zip: DEERFIELD BEACH FL 33442

Title DIRECTOR
Name RATELLE, YVON
Address 4135 CAMBRIDGE F
City-State-Zip: DEERFIELD BEACH FL 33442

I hereby 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 all other like empowered.

SIGNATURE: LINN CAPLAN

PRESIDENT

01/29/2019

Electronic Signature of Signing Officer/Director Detail

Date