

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746037

**Entity Name:** CAMBRIDGE HOUSE OF PORT CHARLOTTE - A  
CONDOMINIUM, INC.

**FILED**  
**Mar 13, 2017**  
**Secretary of State**  
**CC3499145144**

**Current Principal Place of Business:**

CAMBRIDGE HOUSE OF PORT CHARLOTTE  
21260 BRINSON AVENUE  
PORT CHARLOTTE, FL 33952

**Current Mailing Address:**

PO BOX 380758  
MURDOCK, FL 33938 US

**FEI Number: 59-2013469**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

THE GATEWAY GROUP  
1532 RIO DE JANEIRO AVE  
PUNTA GORDA, FL 33983 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            TRUITT, JOSEPH  
Address        PO BOX 380758  
City-State-Zip: MURDOCK FL 33938

Title            VP, DIRECTOR  
Name            SLATER, ROY  
Address        PO BOX 380758  
City-State-Zip: MURDOCK FL 33938

Title            SECRETARY, DIRECTOR  
Name            SIMMONS, JACQUELINE  
Address        PO BOX 380758  
City-State-Zip: MURDOCK FL 33938

Title            TREASURER, DIRECTOR  
Name            FOSTER, GEORGE  
Address        PO BOX 380758  
City-State-Zip: MURDOCK FL 33938

Title            DIRECTOR  
Name            VENELLA, LOUIS  
Address        PO BOX 380758  
City-State-Zip: MURDOCK FL 33938

*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: JOSEPH TRUITT**

**PRESIDENT**

**03/13/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date