

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000011773

Entity Name: CAMBRIA HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**5127 SPANISH OAKS DRIVE
LAKELAND, FL 33805**Current Mailing Address:**5337 N. SOCRUM LOOP ROAD
SUITE 449
LAKELAND, FL 33809 US**FEI Number:** 30-0959383**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BONZELLA, THERESA
5127 SPANISH OAKS DRIVE
LAKELAND, FL 33805 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:** THERESA BONZELLA

02/27/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR, PRESIDENT
Name	TILLEY, RONALD
Address	135 CAMBRIA GROVE CIRCLE
City-State-Zip:	DAVENPORT FL 33837

Title	DIRECTOR, VP
Name	KENYON, ROBB
Address	178 CAMBRIA GROVE CIRCLE
City-State-Zip:	DAVENPORT FL 33837

Title	DIRECTOR, TREASURER
Name	VALLE-PACHECO, CYNTHIA
Address	106 CAMBRIA GROVE CIRCLE
City-State-Zip:	DAVENPORT FL 33837

Title	DIRECTOR, SECRETARY
Name	HOYES, LEONIE
Address	111 CAMBRIA GROVE CIRCLE
City-State-Zip:	DAVENPORT FL 33837

Title	DIRECTOR
Name	TEDERS, MICHAEL
Address	159 CAMBRIA GROVE CIRCLE
City-State-Zip:	DAVENPORT FL 33897

Title	MANAGER
Name	BONZELLA, THERESA
Address	5127 SPANISH OAKS DRIVE
City-State-Zip:	LAKELAND FL 33805

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: THERESA BONZELLA**MANAGER**

02/27/2019

Electronic Signature of Signing Officer/Director Detail

Date