

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22583

Entity Name: CAMBRIDGE HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**C/O FIRST SERVICE RESIDENTIAL
6300 PARK OF COMMERCE BLVD.
BOCA RATON, FL 33487**Current Mailing Address:**C/O FIRST SERVICE RESIDENTIAL
6300 PARK OF COMMERCE BLVD.
BOCA RATON, FL 33487 US**FEI Number:** 65-0036804**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GELFAND, MICHAEL JESQ
REGIONS FINANCIAL TOWER STE 1220
1555 PALM BEACH LAKES BLVD
W PALM BEACH, FL 33401-2329 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	PD
Name	HRAPCHAK, WILLIAM
Address	3935 NW 58TH STREET
City-State-Zip:	BOCA RATON FL 33496

Title	VP
Name	WASSERMAN, DAVID
Address	5702 NW 39TH AVE
City-State-Zip:	BOCA RATON FL 33496

Title	SD
Name	BELL, JULIAN
Address	5799 NW 40TH WAY
City-State-Zip:	BOCA RATON FL 33496

Title	D
Name	AARONSON, PAULETTE
Address	5792 NW 39TH WAY
City-State-Zip:	BOCA RATON FL 33496

Title	TREASURER
Name	EISEN, AMY
Address	3935 NW 58TH ST
City-State-Zip:	BOCA RATON FL 33496

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: WILLIAM HRAPCHAK**PRESIDENT****03/25/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date