### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22583

Entity Name: CAMBRIDGE HOMEOWNERS' ASSOCIATION, INC.

FILED
Apr 14, 2016
Secretary of State
CC2624812623

# **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 Title VI

Name WASSERMAN, DAVID Name AARONSON, PAULETTE5792

Address 5702 NW 39TH ST Address 5792 NW 39TH ST

City-State-Zip: BOCA RATON FL 33496 City-State-Zip: BOCA RATON FL 33496

Title SD Title D

NameBELL, JULIANNameAARONSON, PAULETTEAddress5799 NW 40TH WAYAddress5792 NW 39TH WAYCity-State-Zip:BOCA RATON FL 33496City-State-Zip:BOCA RATON FL 33496

Title TREASURER

Name LACKOWITZ, JEFFREY
Address 5746 NW 39TH WAY
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: DAVID WASSERMAN

**PRESIDENT** 

04/14/2016