

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N24927

**Entity Name:** CAMBRIDGE GREENS OF CITRUS HILLS PROPERTY OWNERS ASSOCIATION, INC.

**FILED**  
**Apr 18, 2014**  
**Secretary of State**  
**CC2165531672**

**Current Principal Place of Business:**

2541 RESTON TERRACE  
HERNANDO, FL 34442

**Current Mailing Address:**

2541 RESTON TERRACE  
HERNANDO, FL 34442 US

**FEI Number: 59-2811603**

**Certificate of Status Desired: No**

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

VILLAGES SERVICES COOPERATIVE  
2541 RESTON TERRACE  
HERNANDO, FL 34442 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  
Name           DEVINE, ALLAN  
Address        2541 RESTON TERRACE  
City-State-Zip:   HERNANDO FL 34442

Title           T  
Name           KLINE, DOUGLAS  
Address        2541 RESTON TERRACE  
City-State-Zip:   HERNANDO FL 34442

Title           VP  
Name           SIMARD, RAY  
Address        2541 RESTON TERRACE  
City-State-Zip:   HERNANDO FL 34442

Title           SECRETARY  
Name           CHANCE, CAROL  
Address        2541 RESTON TERRACE  
City-State-Zip:   HERNANDO FL 34442

Title           DIRECTOR  
Name           PETERS, CAROLE  
Address        2541 RESTON TERRACE  
City-State-Zip:   HERNANDO FL 34442

*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: ALLAN DEVINE**

**PRESIDENT**

**04/18/2014**

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

\_\_\_\_\_  
Date