

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N33539

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

**FILED**  
**Apr 26, 2013**  
**Secretary of State**  
**CC9571350952**

**Current Principal Place of Business:**

2541 N RESTON TERR  
HERNANDO, FL 34442

**Current Mailing Address:**

2541 N RESTON TERR  
HERNANDO, FL 34442 US

**FEI Number: 59-2963547**

**Certificate of Status Desired: No**

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

VILLAGES SERVICES COOP  
2541 N 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	D	Title	D
Name	SIMEK, PAUL	Name	FREDRICKSON, ROBERT
Address	1871 E ALLEGRIE DR	Address	1625 E MONOPOLY LP
City-State-Zip:	INVERNESS FL 34453	City-State-Zip:	INVERNESS FL 34453
Title	P	Title	T
Name	LOWELL, GEORGE	Name	SHERRON, CHARLES
Address	1138 N SHORTLINE WY	Address	1048 N SHORTLINE WY
City-State-Zip:	INVERNESS FL 34453	City-State-Zip:	INVERNESS FL 34453
Title	VP	Title	S
Name	PRINCE, ROBERT	Name	HOLLISTER, ANNETTE
Address	1694 E MONOPOLY LOOP	Address	1550 E MONOPOLY LOOP
City-State-Zip:	INVERNESS FL 34453	City-State-Zip:	INVERNESS FL 34453
Title	DIRECTOR		
Name	ROSS, JACQUELINE		
Address	996 N LAFAYETTE WAY		
City-State-Zip:	INVERNESS FL 34453		

*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: CHARLES SHERRON**

**TREASURER**

**04/26/2013**

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

\_\_\_\_\_  
Date