

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000004101

**Entity Name:** CEDAR RIDGE TOWNHOMES ASSOCIATION, INC.

**Current Principal Place of Business:**

100 FOREST DR.  
BOYNTON BEACH, FL 33426

**FILED**  
**Mar 27, 2018**  
**Secretary of State**  
**CC5469189774**

**Current Mailing Address:**

C/O CMC MANAGEMENT  
2950 JOG ROAD  
GREENACRES, FL 33467

**FEI Number: 65-0897569**

**Certificate of Status Desired: No**

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

DICKER, KRIVOK & STOLOFF  
1818 AUSTRALIAN AVENUE SOUTH  
SUITE 400  
WEST PALM BEACH, FL 33409 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 SECRETARY  
Name CAMILLE, MARTIN  
Address 348 SPRUCE ST  
City-State-Zip: BOYNTON BEACH FL 33426

Title TREASURER  
Name EDWARDS, CYNTHIA  
Address 328 SPRUCE ST  
City-State-Zip: BOYNTON BEACH FL 33426

Title PRESIDENT  
Name VEAL, MELISSA  
Address 305 SPRUCE ST  
City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR  
Name SABA, RICK  
Address 106 SPRUCE ST  
City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR  
Name BRODI, CHERE  
Address 107 SPRUCE ST  
City-State-Zip: BOYNTON BEACH FL 33426

Title VP  
Name FLANK, RANDI  
Address 115 SPRUCE  
City-State-Zip: BOYNTON BEACH FL 33426

Title DIRECTOR  
Name HYACINTHE, FRANTZI  
Address 140 SPRUCE  
City-State-Zip: BOYNTON BEACH FL 33426

*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: MELISSA VEAL**

**PRESIDENT**

**03/27/2018**

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

\_\_\_\_\_  
Date