2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# 300942

Entity Name: COLONIAL RIDGE CAMBRIDGE INC

Current Principal Place of Business:

5505 NO OCEAN BLVD
OCEAN RIDGE, FL 33435

New Principal Place of Business:

Current Mailing Address:

5505 NO OCEAN BLVD
OCEAN RIDGE, FL 33435

New Mailing Address:

FEI Number: 59-1209387 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHN PORTER ACCOUNTING, INC.
400 S FEDERAL HWY
STE 404
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

GPS FIANCIAL SERVICES,INC.
400 S FEDERAL HWY
STE 404
BOYNTON BEACH, FL 33435 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: JOHN PORTER 04/15/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: DESROCHERS, RICHARD
Address: 5505 N OCEAN BLVD C104
City-St-Zip: OCEAN RIDGE, FL 33435

Title: VPD ( ) Delete
Name: GREENWAY, LLOYD
Address: 5505 N. OCEAN BLVD C103
City-St-Zip: OCEAN RODGE, FL 33435

Title: AST ( ) Delete
Name: COX, EILEEN
Address: 5505 N. OCEAN BLVD., 106
City-St-Zip: OCEAN RIDGE, FL 33435

Title: D ( ) Delete
Name: PORTER, JOHN
Address: 1403 W. BOYNTON BEACH BLVD
City-St-Zip: BOYNTON BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: PORTER, JOHN
Address: 400 S FEDERAL HWY STE 404
City-St-Zip: BOYNTON BEACH, FL 33435 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD DESROCHERS D 04/15/2009
Electronic Signature of Signing Officer or Director Date