2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725579

Entity Name: CAMBRIDGE CLUB, INC.

Apr 12, 2006 Secretary of State

1044 CASTELLO DRIVE #206 NAPLES, FL 34103

Current Mailing Address: New Mailing Address:

1044 CASTELLO DRIVE #206 NAPLES, FL 34103

OFFICERS AND DIRECTORS:

FEI Number: 59-1719677 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SOUTHWEST PROPERTY MANAGEMENT 1044 CASTELLO DRIVE, SUITE #206 NAPLES, FL 34103

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

EMRICK, LEWIS EMRICK, LEWIS Name: Name: Address: 333 FOURTH AVENUE SOUTH #104 Address: 333 FOURTH AVENUE SOUTH #104

City-St-Zip: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34102

Title: Title: () Delete () Change () Addition Name:

BRADY, PHYLLIS Name: Address: 333 4TH AVE. SOUTH #102 Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip:

Title: () Delete Title: (X) Change () Addition DELANEY, EDWIN Name: DELANEY, EDWIN Name:

333 FOURTH AVENUE SOUTH #201 Address:

333 FOURTH AVENUE SOUTH #201 Address:

City-St-Zip: NAPLES, FL City-St-Zip: NAPLES, FL

() Delete Title: PD Title: (X) Change () Addition Name: GAVIN, JOAN Name: GAVIN, JOAN

333 FOURTH AVE, SOUTH #204 333 FOURTH AVE, SOUTH #204 Address: Address:

City-St-Zip: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34102

Title: () Delete Title: (X) Change () Addition

HARMSEN, RONALD JONES, PAT Name: Name: 333 4TH AVE. SOUTH #301 333 4TH AVE S, #106 Address: Address: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34102 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOAN GAVIN Ρ 04/12/2006