2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 740417

1. Entity Name

CAMBRIDGE "C" CONDOMINIUM ASSOCIATION, INC.

FILED
Jul 12, 2000 8:00 am
Secretary of State
04-25-2000 90324 001 15,006.25

Principal Place of Business	Mailing Address
C/O CAMBRIDGE C-4041 DEERFIELD BEACH FL 33442	C/O CAMBRIDGE C-4041 DEERFIELD BEACH FL 33442

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1920115 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CONDO OWNER ORGANIZATION CENTURY VILL E IN EAST INC. 3501 WEST DRIVE DEERFIELD BEACH FL 33442-2085	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BLOOM, JULIUS 1041 CAMBRIDGE C DEERFIELD BEACH FL 33442	☐ Delete	POLIKOFF LEO 4041 CAMBRIDGE C DEERFIELD BCH. FL. 33442	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD POLIKOFF,MARGIE 4041 CAMBRIDGE C DEERFIELD BCH FL	☐ Delete	KATZ FLORENCE 1045 CAMBRIDGE C DEERFIELD BCH. FL. 33442	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD PECCHIA, PATRICK 2058 CAMBRIDGE C DEERFIELD BCH FL	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD LINDENBAUM, MIRIAM 3044 CAMBRIDGE C DEERFIELD BEACH FL	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KATZ, JULIUS 1045 CAMBRIDGE C DEERFIELD FL	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CS SCHWARTZWALD, IRVING 1056 CAMBRIDGE C DEERFIELD BEACH FL	☐ Delete		☐ Change ☐ Addition

CR2E037 (9/99)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARGIE POLIKOFF MARGIE POLIKOFF 1/18/2000 954-428-3204
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #