

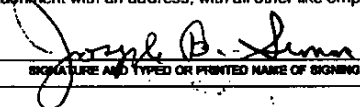


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 8:00 am
Secretary of State

04-24-2008 90121 006 ****61.25

DOCUMENT # 766453 1. Entity Name CAMBRIDGE AT HUNTERS RUN CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436			Mailing Address 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		04032008 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 59-2334395	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent DICKER, KRIVOK & STOLOFF, PA 1818 AUSTRALIAN AVE SO SUITE 400 WEST PALM BEACH, FL 33409			7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD REINGOLD, MARVIN 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SHAPIRO, BERNARD 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SILVERMAN, DAVID 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SILVERMAN, DAVID 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SIMON, JOSEPH 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SIMON, JOSEPH 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREENBERG, MARVIN 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HARRIS, JAY 3700 CLUBHOUSE LN BOYNTON BEACH, FL 33436 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HESS, MARCIA 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 			4-15-08 561-734-5000		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		