


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 25, 2007 08:00 AM
Secretary of State

DOCUMENT # L02000020923
 1. Entity Name
 CAMBRIDGE FINANCE, LLC



Principal Place of Business
 6394 VIA ROSA
 BOCA RATON, FL 33433

Mailing Address
 6394 VIA ROSA
 BOCA RATON, FL 33433

DO NOT WRITE IN THIS SPACE



01082007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 32-0027033	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HEINERMANN, THEODORE J
 BÜTZEL LONG, P.C.
 1200 N FEDERAL HWY, STE 420
 BOCA RATON, FL 33432

DO NOT WRITE IN THIS SPACE

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

**Filing Fee is \$50.00
 Due by May 1, 2007**

00000604436
 01/29/07-80052-023 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR STONE, ELLIOT 6394 VIA ROSA BOCA RATON, FL 33433
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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 

1/22/07
Date

561-447-7689
Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE