

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000012188

**FILED**  
**Feb 02, 2012**  
**Secretary of State**

**Entity Name:** CAMBRIDGE MEWS OF ST. ANDREWS EAST ASSOCIATION, INC.

**Current Principal Place of Business:**

720 SHAMROCK BLVD  
VENICE, FL 34293

**New Principal Place of Business:**

**Current Mailing Address:**

720 SHAMROCK BLVD  
VENICE, FL 34293

**New Mailing Address:**

**FEI Number:** 51-0564659

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LATTMANN, STEPHEN E  
720 SHAMROCK BLVD  
VENICE, FL 34293 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LATTMANN, STEPHEN E  
Address: 720 SHAMROCK BLVD  
City-St-Zip: VENICE, FL 34293

Title: STD  
Name: JOLLEY, JACK  
Address: 1575 MONARCH DRIVE  
City-St-Zip: VENICE, FL 34293

Title: VPD  
Name: DEBBIE, CONNELLY L  
Address: 720 SHAMROCK BLVD.  
City-St-Zip: VENICE, FL 34293

I hereby 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 all other like empowered.

SIGNATURE: DEBBIE L. CONNELLY

VP

02/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date