

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2007 8:00 am
Secretary of State

07-16-2007 90128 028 ****61.25

DOCUMENT # N18651

1. Entity Name
**CAMBRIDGE AT ABERDEEN HOMEOWNERS
ASSOCIATION, INC.**



Principal Place of Business
**% CAMPBELL PROPERTY MGMT
3918 VIA POINCIANA DR #9
LAKE WORTH, FL 33467 US**

Mailing Address
**% CAMPBELL PROPERTY MGMT
3918 VIA POINCIANA DR #9
LAKE WORTH, FL 33467 US**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07052007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2761399

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

**ST JOHN COR FICR & LEMME PA
CENTURION TOWER SUITE 701
1601 FORUM PLACE
WEST PALM BEACH, FL 33401**

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

Joyce Martelli **Joyce Martelli, For the Board**

7-5-07.

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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 **D** ☒ Delete
NAME **GARTBURG, DALE**
STREET ADDRESS **6804 BITTERBUSH PLACE**
CITY-ST-ZIP **BOYNTON BEACH, FL 33437**

TITLE **Director** ☐ Change ☒ Addition
NAME **Joe McDonald**
STREET ADDRESS **6803 Bitterbush Place**
CITY-ST-ZIP **Boynton Beach, FL 33437**

TITLE **VD** ☐ Delete
NAME **ROSOFF, PETER**
STREET ADDRESS **7019 BITTERBUSH**
CITY-ST-ZIP **BOYNTON BCH, FL 33437**

TITLE **Director** ☐ Change ☒ Addition
NAME **Patrick Tammany**
STREET ADDRESS **6779 Bitterbush Place**
CITY-ST-ZIP **Boynton Beach, FL 33437**

TITLE **SD** ☐ Delete
NAME **MARION, GLORIA**
STREET ADDRESS **8078 POPASH CT**
CITY-ST-ZIP **BOYNTON BCH, FL 33437**

TITLE **Director** ☐ Change ☒ Addition
NAME **Tom Durick**
STREET ADDRESS **6796 Bitterbush Place**
CITY-ST-ZIP **Boynton Beach, FL 33437**

TITLE **Director** ☐ Delete ☒ Change
NAME **LEVY, STANLEY**
STREET ADDRESS **6867 BITTERBUSH PL**
CITY-ST-ZIP **BOYNTON BEACH, FL 33437**

TITLE **Treasurer** ☐ Change ☒ Addition
NAME **stan Schwartz**
STREET ADDRESS **7028 Bitterbush Place**
CITY-ST-ZIP **Boynton Beach, FL 33437**

TITLE **D** ☐ Delete
NAME **GURSKY, BURT**
STREET ADDRESS **6819 BITTERBUSH PLACE**
CITY-ST-ZIP **BOYNTON BCH, FL 33437**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☐ Delete
NAME **MELZER, MARTY**
STREET ADDRESS **6939 BITTERBUSH PL**
CITY-ST-ZIP **BOYNTON BCH, FL 33437**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 information empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/13/07