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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996
DOCUMENT #

Principal Place of Business

N22583

(1)

Mailing Address

CAMBRIDGE HOMEOWNERS' ASSOCIATION, INC.

C/O LANG MANAGEMENT 5295 TOWN CENTER ROAD. STE. 200 BOCA RATON FL 33486 US			C/O LANG MANAGEMENT 5295 TOWN CENTER ROAD. STE. 200 BOCA RATON FL 33486 US					3. Date Incorporated or Qualifie	d 3a .	Date of Las 05/01/	
2. Principal Pla	ice of Business	2a. Ma	aling Address					4. FEI Number			Applied For
21		26						65-0036804			Not Applicable
Suite, Apt. #, etc.			Suite, Apt #, etc.					5 Certificate of Status Hesired 1.1			5 Additional Required
City & State			City & State					6. Election Campaign Financing) —	\$5.0	00 May Be
23		28						Trust Fund Contribution		Add	ed to Fees
Zip	Country	Zıç)	├ ¬	untry			8. This corporation has liability:			s. 199.032,
24	25	29		30				Florida Statutes	Yes		
	9. Name and Address of Current	Registere	stered Agent 81 Name				10. Name and Address of New Registered Agent				
101100	NAL 148(1144117										
ISAACSON, WILLIAM K			8			Street	Address	(P.O. Box Number is Not Accep	table)		
5295 TOWN CENTER RD.					83				···		
STE. #200											
BUCA R	ATON FL 33486				84	City			F	85 2	ip Code
44 Over rest to	o the provisions of Sections 617.0502	nd 617 16	OR Florida Ptokut	os the ob		nomed se	ornoratio	n outpoits this statement for the	<u> </u>		registered office
or registere	o the provisions of sections of 7.0302 a ed agent, or both, in the State of Florida h, and accept the obligations of, Section	 Such ch 	ange was authoriz	zed by the	corp	oration's	board o	f directors. Thereby accept the a	ppointment	as registere	d agent. I am
SIGNATURE _	Signature, typed or printed name of registered agent a	id little if acute	atie (N	DIE Registere	d Agen	t sidnature re	reduired whe	en reinstatingi	DATE		
12.	OFFICERS AND			13			-	ADDITIONS/CHANGES TO	DEFICERS A	ND DIRECT	ORS IN 12
TIFLE	PD		DELETE	111	TITLE		Þ			Change	Addition
NAME	SEELEY, DAVID			121	MAME		TAF	F, MORRIS			
STREET ADDRESS	4078 N.W. 57TH ST.			133	STREET	ADDRESS		NW STELST			
CITY-ST-ZIP	BOCA RATON FL 33496		/	1.4 (CITY - S	T-ŽIP	Bour	a Ratin, F1 33496			
TITLE	VPD		DELETE	2 1 1	TITLE		D			Change	Addition
NAME	COOPER, ROBERT			221	NAME			es Nobil			:
STREET ADDRESS	5755 N.W. 40TH TERRACE			233	STREET	ADDRESS	5135	S NW 40 WAY			
CITY - ST - ZIP	BOCA RATON FL 33496			2 4	C(1) Y - 5	ST - ZIP	Bock	+ Raton , F1 33496			
TITLE	SD		□ DELETE	31	TITLE		D	1.00		Change	Addition
NAME	SINE, ALBERT			321	NAME		Vina	at Digioeno			
STREET ADDRESS	4091 N.W. 58TH ST.			333	STREET	ADDRESS		s Nws8 steet			
CITY - ST - ZIP	BOCA RATON FL 33496			3 4	CITY - S	ST - ZIP	Bac.n	Rato F1 33496		/	
TITLE	TD		DELETE	41	TITLE		P/T			Change	[_ Addition
NAME	COHEN, JAY			4 2	NAME		Cohe	n,144			
STREET ADOPESS	4014 NW 58TH ST.			43	STREET	ADDRESS		NW 58thst			
CITY - ST - ZIP	BOCA RATON FL 33496			4.4	DITY-S	T - ZIP	Boci	a Raton, FL 33490	,		
TITLE	D		DELETE	51	TITLE		VP/	Ď		Change	☐ Addition
NAME	epstein, richard			52	NAME			rein, Richard			
STREET ADORESS	4023 N.W. 58TH ST.			5.3	STREET	ADDRESS		3 NW 28 B(5 +			
C(1) Y - ST - Z(F	BOCA RATON FL 33496			5.4	CITY - S	J - ZIP		Raton, F1 33496			
TITLE	D		DEFELE	61	IIILE		BAr	BARA SHAPIRO		Change	Addition
NAME	PODOLSIY, BARRY			62	NAME		₽				
STREET ADDRESS	3951 N.W. 58TH PLACE			63	STREET	ADDRESS		8 NW 58 d Place			
CITY-ST-ZIP	BOCA RATON FL 33496				CITY - S			a Raton, Fl 3349 (
14. 1 do hereb	y certify that the information supplied w	ith this film	g is voluntarily fur	nished and	d doe	s not qua	alify for the	he exemption stated in Section and that my signature shall be up	19.07(3)(k),	Florida Stat	utes. I further
certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.											

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14/96

Daytime Ptrone #

(12/95)