

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N22583

1. Entity Name

CAMBRIDGE HOMEOWNERS' ASSOCIATION, INC.

FILED
Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90026 046 ****61.25

Principal Place of Business

Mailing Address

C/O HAWK-EYE MANAGEMENT
3901 N. FEDERAL HWY /STE 202
BOCA RATON FL 33431
US

C/O HAWK-EYE MANAGEMENT
3901 N. FEDERAL HWY/STE 202
BOCA RATON FL 33431-4509
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0036804

Applied For

Not Applicable

Zip

Country

Zip

Country

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

PATTIE, PAUL *Pattie, PAUL*
3901 N. FEDERAL HWY
STE 202
BOCA RATON FL 33431

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME PODOLSKY, BARRY
STREET ADDRESS 3951 N.W. 58TH PL
CITY-ST-ZIP BOCA RATON FL 33496

TITLE D ☒ Change ☐ Addition
NAME PODOLSKY, BARRY
STREET ADDRESS 3951 N.W. 58TH PL
CITY-ST-ZIP BOCA RATON, FL. 33496

TITLE TD ☐ Delete
NAME NOBIL, JAMES
STREET ADDRESS 5735 NW 40TH WAY
CITY-ST-ZIP BOCA RATON FL 33496

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

TITLE VPD ☒ Delete
NAME DI GIGIORNO, VINCENT
STREET ADDRESS 3935 NW 58 STREET
CITY-ST-ZIP BOCA RATON FL 33496

TITLE PD ☐ Change ☒ Addition
NAME HRAPCHAK, WILLIAM
STREET ADDRESS 3924 NW 58 ST.
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE D ☒ Delete
NAME SINE, ALBERT
STREET ADDRESS 4091 NW 58 ST
CITY-ST-ZIP BOCA RATON FL 33496

TITLE VD ☒ Change ☐ Addition
NAME SINE, ALBERT
STREET ADDRESS 4091 NW 58 ST
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE TD ☒ Delete
NAME PODOLSKY, BARRY
STREET ADDRESS 3951 N.W. 58TH PLACE
CITY-ST-ZIP BOCA RATON FL 33496

TITLE SD ☐ Change ☒ Addition
NAME BELL, JULIAN
STREET ADDRESS 5799 NW 40TH WAY
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE D ☐ Delete
NAME GELLER, NORMA
STREET ADDRESS 5724 N.W. 39TH AVE
CITY-ST-ZIP BOCA RATON FL 33496

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 exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)