

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34754

FILED
Apr 20, 2009
Secretary of State

Entity Name: CAMBRIDGE AT WYCLIFFE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

GRS MANAGEMENT ASSOCIATES, INC.
3800 WOODLAKE BLVD., SUITE 309
LAKE WORTH, FL 33463 US

New Principal Place of Business:

Current Mailing Address:

GRS MANAGEMENT ASSOCIATES, INC.
3800 WOODLAKE BLVD., SUITE 309
LAKE WORTH, FL 33463 US

New Mailing Address:

FEI Number: 65-0284510

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHENDELL & ASSOCIATES, P.A.
3650 N FEDERAL HIGHWAY #202
LIGHTHOUSE POINT, FL 33064 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: D () Delete
Name: ORGEL, ALVIN
Address: 4549 CARLTEN GOLF DR
City-St-Zip: LAKEWORTH, FL 33487

Title: VD () Delete
Name: SMITH, WALTER
Address: 4717 CARLTON GOLF DR
City-St-Zip: LAKE WORTH, FL 33467

Title: PD () Delete
Name: FISH, MICHAEL
Address: 4750 CARLTON GOLF DR
City-St-Zip: LAKE WORTH, FL 33467

Title: TD () Delete
Name: FRADKIN, EDWIN
Address: 4521 CARLTON GOLF DR
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete
Name: TOUBIN, MICHAEL
Address: 4513 CARLTON GOLF DR
City-St-Zip: LAKE WORTH, FL 33467

Title: SD () Delete
Name: TOUBIN, MICHAEL
Address: 4513 CARLTON GOLF DR
City-St-Zip: WELLINGTON, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: DAVIDSON, STEVEN
Address: 4718 CARLTON GOLF DR
City-St-Zip: WELLINGTON, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MICHAEL FISH

PRES

04/20/2009

Electronic Signature of Signing Officer or Director

Date