

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34754

FILED
Apr 13, 2012
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:

POSNER, MICHAEL J ESQ
4420 BEACON CIR
W PALM BEACH, FL 33407 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
Name: NEGRIN, NORMAN
Address: 4553 CARLTEN GOLF DR
City-St-Zip: WELLINGTON, FL 33449

Title: VD
Name: SMITH, WALTER
Address: 4717 CARLTON GOLF DR.
City-St-Zip: WELLINGTON, FL 33449

Title: PD
Name: FISH, MICHAEL
Address: 4750 CARLTON GOLF DR
City-St-Zip: WELLINGTON, FL 33449

Title: TD
Name: FRADKIN, EDWIN
Address: 4521 CARLTON GOLF DR.
City-St-Zip: WELLINGTON, FL 33449

Title: SD
Name: DAVIDSON, STEVEN
Address: 4518 CARLTON GOLF DR.
City-St-Zip: WELLINGTON, FL 33449

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: MICHAEL FISH

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04/13/2012

Electronic Signature of Signing Officer or Director

Date