

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90240 042 ****61.25

DOCUMENT # N37396

1. Entity Name

**CAMBRIDGE AT CENTURY VILLAGE CONDOMINIUM #IV
ASSOCIATION, INC.**



Principal Place of Business

15951 SW 41 STREET
SUITE 150
DAVIE FL 33331
US

Mailing Address

15951 SW 41 STREET
SUITE 150
DAVIE FL 33331
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

65-0236163

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

**SCHNITZER, STEVE
15951 SW 41 STREET
SUITE 150
DAVIE FL 33331**

Name **Charles W Davis**

Street Address (P.O. Box Number is Not Acceptable)

**218 Prime Management
13460 SW 13th St #101**

City **Pembroke Pines**

FL

Zip Code

33024

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

General Manager

Charles W Davis R.A.

3/28/06

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

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 **SOLOMON, JACK**
STREET ADDRESS **1201 SW 128 TERR #E101**
CITY-ST-ZIP **PEMBROKE PINES FL 33027**

TITLE **2nd VP** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☐ Delete
NAME **SKUPSKY, FRANCES**
STREET ADDRESS **12701 SW 14TH ST**
CITY-ST-ZIP **PEMBROKE PINES FL 33027**

TITLE **P/T** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **1VPD** ☐ Delete
NAME **CHUKONIS, ROBERT**
STREET ADDRESS **1401 SW 128TH TERRACE**
CITY-ST-ZIP **PEMBROKE PINES FL 33027**

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

TITLE **PD** ☒ Delete
NAME **HECHT, GERSON**
STREET ADDRESS **12701 SW 13 ST**
CITY-ST-ZIP **PEMBROKE PINES FL 33027**

TITLE **D** ☐ Change ☐ Addition
NAME **Gisela Wolf**
STREET ADDRESS **12701 SW 13 ST F-214**
CITY-ST-ZIP **Pembroke Pines FL 33024**

TITLE **S** ☐ Delete
NAME **BRETAN, HARRIET**
STREET ADDRESS **1151 SW 128 TERR #D214**
CITY-ST-ZIP **PEMBROKE PINES FL 33027**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Section 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 like empowered.

SIGNATURE:

Frances Skupsky Pres/Tras **3/29/06**