

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90150 021 ****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

40066200



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

13460 SW 10th Street

13460 S.W. 10th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 101

Suite 101

City & State

City & State

Pembroke Pines, FL

Pembroke Pines, FL

Zip
33027

Country
US

Zip
33027

Country
US

03292007 Chg-NP CR2E037 (12/06)

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

DAVIS, CHARLES W
13460 SW 10 ST STE 101
HOLLYWOOD, FL 33027

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Charles W Davis Reg Agt

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

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

TITLE 2VP ☐ Delete
NAME SOLOMON, JACK
STREET ADDRESS 1201 SW 128 TERR #E101
CITY-ST-ZIP PEMBROKE PINES, FL 33027

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

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

TITLE D ☐ Delete
NAME GISELA, WOLK
STREET ADDRESS 12701 SW 13ST F-214
CITY-ST-ZIP PEMBROKE PINES, FL 33027

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
NAME Sara Sanchez
STREET ADDRESS 1401 SW 128 Terrace H-308
CITY-ST-ZIP Pembroke Pines, FL 33027

TITLE VP ☒ Change ☐ Addition
NAME Gisela Wolf
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 Chapter 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, Treas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/11/07 954-441-3538