## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N37396

FILED Apr 08, 2009 Secretary of State

Entity Name: CAMBRIDGE AT CENTURY VILLAGE CONDOMINIUM #IV ASSOCIATION, INC.

Current Pi	rincipal Place of Business:	New Principal Place of Business:
SUITE 101	10TH STREET DKE PINES, FL 33027 US	PROGRESSIVE COMMUNITY MGMT-FT LAUDERDALE 549 SAWGRASS CORPORATE PKWY SUNRISE, FL 33325 US
Current Mailing Address:		New Mailing Address:
SUITE 101	10TH STREET DKE PINES, FL 33027 US	PROGRESSIVE COMMUNITY MGMT-FT LAUDERDALE 549 SAWGRASS CORPORATE PKWY SUNRISE, FL 33325 US
FEI Number:	65-0236163 FEI Number Applied For ( ) FEI Nu	mber Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent: N		Name and Address of New Registered Agent:
13460 SW	HARLES W 10 ST STE 101 DOD, FL 33027 US	PROGRESSIVE COMMUNITY MGMT-FT LAUDERDALE PROGRESSIVE COMMUNITY MGMT-FT LAUDERDALE 549 SAWGRASS CORPORATE PKWY SUNRISE, FL 33325 US
	named entity submits this statement for the purpose of Florida.	of changing its registered office or registered agent, or both,
SIGNATUF	RE: HELENIZE GOMES	04/08/2009
	Electronic Signature of Registered Agent	Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	T () Delete SOLOMON, JACK 1201 SW 128 TERR #E101 PEMBROKE PINES, FL 33027	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	P () Delete SKUPSKY, FRANCES 12701 SW 14TH ST PEMBROKE PINES, FL 33027	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D ( ) Delete SANCHEZ, SARA 1401 SW 128 TERR H-308 PEMBROKE PINES, FL 33027	Title: D (X) Change ( ) Addition Name: ESTEPA, ALEJANDRO Address: 1401 SW 128 TERR H-110 City-St-Zip: PEMBROKE PINES, FL 33027
Title: Name: Address: City-St-Zip:	VP ( ) Delete WOLF, GISELA 12701 SW 13ST F-214 PEMBROKE PINES, FL 33027	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title:	S () Delete	Title: ( ) Change ( ) Addition

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: HELENIZE GOMES D 04/08/2009