

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 29, 1999 8:00 am
Secretary of State

03-29-1999 90079 016 ****61.25

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1. Corporation Name

CAMBRIDGE COMMONS OWNERS ASSOCIATION, INC.

Principal Place of Business

ROCCO SALVIA
1818 NEEDHAM RD
APOPKA FL 32712
US

Mailing Address

ROCCO SALVIA
1818 NEEDHAM RD
APOPKA FL 32712
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

3. Date Incorporated or Qualified

03/22/1995

4. FEI Number

59-3303795

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

ROCCO SALVIA
1818 NEEDHAM RD
APOPKA FL 32712

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE
NAME **ROCCO SALVIA**
STREET ADDRESS **1818 NEEDHAM RD**
CITY-ST-ZIP **APOPKA FL 32712**

TITLE **VPD** ☒ DELETE
NAME **STEWART, RON**
STREET ADDRESS **1780 CRANBERRY ISLE WAY**
CITY-ST-ZIP **APOPKA FL 32712**

TITLE **SD** ☒ DELETE
NAME **ROSENBLATT, JANET**
STREET ADDRESS **2055 CRANBERRY ISLE WAY**
CITY-ST-ZIP **APOPKA FL 32712**

TITLE **ID SEC/TRANS** ☒ DELETE
NAME **ROSENBLATT, RICHARD**
STREET ADDRESS **2055 CRANBERRY ISLE WAY**
CITY-ST-ZIP **APOPKA FL 32712**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE **VPD FORAKER, ALAN** ☒ Change ☐ Addition
2.2 NAME **ALAN FORAKER**
2.3 STREET ADDRESS **1800 NEEDHAM RD**
2.4 CITY-ST-ZIP **APOPKA, FL 32712**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rocco Salvia **ROCCO SALVIA**

3/25/99

407-884-7070

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)