2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 09, 2004 8:00 am Secretary of State DOCUMENT # N95000003897 1. Entity Name 04-09-2004 90079 048 ****61.25 CAMBRIDGE PARK AT REGENCY LAKES HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address % CAMPBELL PROPERTY MANAGEMENT 1215 E. HILLSBORO BLVD. % CAMPBELL PROPERTY MANAGEMENT 1215 E. HILLSBORO BLVD DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) Applied For City & State City & State 4. FEI Number 65-0613397 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BECKER & POLIAKOFF, P.A. Street Address (P.O. Box Number is Not Acceptable) C/O GARY A. POLIAKOFF, J.D. 3111 STIRLING ROAD FT. LAUDERDALE FL 33312 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10 OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition TITAE ☐ Delete TITLE KARNEY, JOYCE M NAME NAME 5510 LAKE TERN PLACE STREET ADDRESS STREET ADDRESS COCONUT CREEK FL 33073 CITY-ST-ZIP CITY-ST-ZIF ☐ Delete TITLE ☐ Change ☐ Addition TITLE BRUCE, KIMBERLY D NAME NAME 5522 LAKE TERN PLACE STREET ADDRESS STREET ADDRESS COCONUT CREEK FL 33073 CITY - ST - ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE [7] Chance ☐ Addition WOSKOBOJNIK, MARTHA LILLY NAME NAME 5539 LAKE TERN COURT STREET ADDRESS STREET ADDRESS COCONUT CREEK FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE MAZZONI, DONNA NAME NAME 5524 LAKE TERNICT STREET ADDRESS STREET ADDRESS COCONUT CREEK FL 33073 .CITY-ST-ZIP CITY-ST-78 Change Addition TITLE ☐ Delete TITLE YATES, MICHELLE NAME NAME 5540 LAKE TERN COURT STREET ADDRESS STREET ADDRESS COCONUT CREEK FL CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Delete TITLE . Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 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.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

Daytime Phone #