

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003897

FILED  
Jan 13, 2009  
Secretary of State

**Entity Name:** CAMBRIDGE PARK AT REGENCY LAKES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

% CAMPBELL PROPERTY MANAGEMENT  
1215 E. HILLSBORO BLVD.  
DEERFIELD BEACH, FL 33441 US

**New Principal Place of Business:**

**Current Mailing Address:**

% CAMPBELL PROPERTY MANAGEMENT  
1215 E. HILLSBORO BLVD.  
DEERFIELD BEACH, FL 33441 US

**New Mailing Address:**

**FEI Number:** 65-0613397

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BECKER & POLIAKOFF, P.A.  
C/O GARY A. POLIAKOFF, J.D.  
3111 STIRLING ROAD  
FT. LAUDERDALE, FL 33312 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KARNEY, JOYCE M  
Address: 5510 LAKE TERN PLACE  
City-St-Zip: COCONUT CREEK, FL 33073

Title: VPD ( ) Delete  
Name: BRUCE, KIMBERLY D  
Address: 5522 LAKE TERN PLACE  
City-St-Zip: COCONUT CREEK, FL 33073

Title: SD ( ) Delete  
Name: BLOSTEIN, JEFF  
Address: 6410 LAKE TERN WAY  
City-St-Zip: COCONUT CREEK, FL 33073

Title: TD ( ) Delete  
Name: MAZZONI, DONNA  
Address: 5524 LAKE TERN CT  
City-St-Zip: COCONUT CREEK, FL 33073

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOYCE KARNEY

P

01/13/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date