

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90210 020 ****61.25

DOCUMENT # N98000000517

1. Entity Name
CAMDEN CLUB HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779-5044 US

Mailing Address
2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779-5044 US

40083304



2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

04052007 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number
59-3547289

Applied For
Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 STE 5000
LONGWOOD, FL 32779

7. Name and Address of New Registered Agent

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 _____
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 NAME STREET ADDRESS CITY-ST-ZIP	PD SHARPLESS, SAMUEL L 9561 SOUTHERN GARDEN CIR ALTAMONTE SPRINGS, FL 32714 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ROSENBERG, MARC H 9516 SOUTHERN GARDEN CIR ALTAMONTE SPRINGS, FL 32714 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TAYLOR, CLAIRE M 9528 SOUTHERN GARDEN CIR ALTAMONTE SPRINGS, FL 32714 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD JOLLEY, GINGER 9441 SOUTHERN GARDEN ALTAMONTE SPRINGS, FL 32714 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUZZI, RAISA 9513 SOUTHERN GARDEN CIR ALTAMONTE SPRINGS, FL 32714 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PLUMMER, DAVID 9525 SOUTHERN GARDEN CIR ALTAMONTE SPRINGS, FL 32714 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BRITO, DIANA 5031 PINELAND LN ALTAMONTE SPRINGS FL 32714 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROSENBERG, MARC 9516 SOUTHERN GARDEN CIR ALTAMONTE SPRINGS FL 32714 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD STURM, JOJO 9465 SOUTHERN GARDEN CIR ALTAMONTE SPRINGS FL 32714 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLARK, CHRISTINE 9545 SOUTHERN GARDEN CIR ALTAMONTE SPRINGS FL 32714 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHEELER, STEVE 5009 SWEET LEAF CT ALTAMONTE SPRINGS FL 32714 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PLUMMER, DAVID 9525 SOUTHERN GARDEN CIR ALTAMONTE SPRINGS FL 32714 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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: Mar H. Rosenberg 4/23/07 407-245-0010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # X-210

ATTACHMENT

40083507

CAMDEN CLUB HOMEOWNERS ASSOCIATION, INC.
DOCUMENT # N9800000051

OFFICERS AND DIRECTORS CONT...

D
SMITH, ROY
9536 SOUTHERN GARDEN CIR
ALTAMONTE SPRINGS FL 32714