2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2007 8:00 am
Secretary of State
03-30-2007 90143 001 ****70.00

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1. Entity Name
KAMBRIDGE SUBDIVISION HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
PO BOX 33 LUTZ, FL 33548	PO BOX 33 LUTZ, FL 33548

03062007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3306442 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LEGGETT, DONALD JR
17606 KAMBRIDGE POINT DRIVE
LUTZ, FL 33548

7. Name and Address of New Registered Agent

Name: PAUL CHRISTOPHER N.
Street Address (P.O. Box Number is Not Acceptable): 808 BRANTENBURG WAY
City: LUTZ FL Zip Code: 33548

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: CHRISTOPHER N. PAUL PRESIDENT 3-6-07
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP LEGGETT, DONALD JR 17606 KAMBRIDGE POINT DRIVE LUTZ, FL 33548	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP PAUL, CHRISTOPHER N. 808 BRANTENBURG WAY LUTZ FL 33548	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT KIMBLE, RONALD H 17614 KAMBRIDGE POINT DRIVE LUTZ, FL 33548	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS COPETAS, CHRIS 711 BRANTENBURG WAY LUTZ, FL 33548	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS MOORE, JONATHAN S 17608 KAMBRIDGE POINT DRIVE LUTZ FL 33548	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV TOELLER, DON 801 BRANTENBERG WAY LUTZ, FL 33548	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOWERS, ARWREQ 704 BRANTENBURG WAY LUTZ, FL 33548	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV LAUK, JAMES 17609 KAMBRIDGE POINT DRIVE LUTZ FL 33548	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FERLITA, ANGELO 804 BRANTENBURG WAY LUTZ, FL 33548	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: [signature] 3-6-07 813-987-6302
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #