2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004650

Feb 24, 2009 Secretary of State

Entity Name: CAMBRIDGE CROSSING PHASE 1, PHASE 1A AND PHASE 2 PROPERTY OWNERS ASSOCIATION,

Current Principal Place of Business: New Principal Place of Business:

2582 SOUTH MAGUIRE RD 318

OCOEE, FL 34761

New Mailing Address: Current Mailing Address:

PO BOX 783367

WINTER GARDEN, FL 34778 US

FEI Number: 59-3622674 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SPENCER, SOLOMON 14443 PRÚNNING WOOD PLACE WINTER GARDEN, FL 34787

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

() Change () Addition () Delete

FOURNIER, ROBERT Name: Name: 12125 REBECCAS RUN DR Address: Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip:

Title: Title: VPD (X) Change () Addition () Delete

MOREY, ANGEL Name: GERVASE, DONALD Name: Address: 1013 SPRING MILL DR Address: 12012 REBECCAS RUN City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: WINTER GARDEN, FL 34787

Title: PD () Delete Title: () Change () Addition

SKUBAS, JOSEPH Name: Name: 1102 ENGLISH GARDEN LN Address: Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip:

(X) Change () Addition Title: VPD () Delete Title: STD Name: GERVASE, DONALD Name: LEGROS, BRIAN

2061 WINDERMERE CROSSING CIR Address: 12012 REBECCAS RUN Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: WINTER GARDEN, FL 34787

Title: STD (X) Delete Title: () Change () Addition

LEGROS, BRIAN Name: Name: 2061 WINDERMERE CROSS CIR Address: Address: City-St-Zip: WINTER GARDEN, FL 34787 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: SPENCER SOLOMON RΑ 02/24/2009