

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18651

FILED
Apr 22, 2014
Secretary of State
CC1519811579**Entity Name:** CAMBRIDGE AT ABERDEEN HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**% CAMPBELL PROPERTY MGMT
3918 VIA POINCIANA DR #9
LAKE WORTH, FL 33467**Current Mailing Address:**% CAMPBELL PROPERTY MGMT
3918 VIA POINCIANA DR #9
LAKE WORTH, FL 33467 US**FEI Number: 59-2761399****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LARRY SCHNER PA
750 SOUTH DIXIE HIGHWAY
BOCA RATON, FL 33432 US*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**Officer/Director Detail :**Title VP
Name ROSOFF, PETER
Address 7019 BITTERBUSH PLACE
City-State-Zip: BOYNTON BEACH FL 33437Title PRESIDENT
Name MARLER, LUKE
Address 6931 BITTERBUSH PLACE
City-State-Zip: BOYNTON BEACH FL 33437Title TD
Name SCHWARTZ, STAN
Address 7028 BITTERBUSH PLACE
City-State-Zip: BOYNTON BEACH FL 33437Title D
Name MCDONALD, JOE
Address 6803 BITTERBUSH PL
City-State-Zip: BOYNTON BCH FL 33437Title DIRECTOR
Name MELZER, MARTY
Address 6939 BITTERBUSH PL
City-State-Zip: BOYNTON BEACH FL 33437Title DIRECTOR
Name RICHARD, GUYLAINE
Address 6915 BITTERBUSH PLACE
City-State-Zip: BOYNTON BEACH FL 33472Title SECRETARY
Name SNYDER, RICK
Address 8095 POPASH COURT
City-State-Zip: BOYNTON BEACH FL 33472

I hereby 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 all other like empowered.

SIGNATURE: LUKE MARLER**PRESIDENT****04/22/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date