

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22935

Entity Name: CAMBRIDGE AT CENTURY VILLAGE CONDOMINIUM #1
ASSOCIATION, INC.**FILED**
Feb 06, 2019
Secretary of State
1668315991CC**Current Principal Place of Business:**13460 SW 10TH STREET
SUITE 101
PEMBROOKE PINES, FL 33027**Current Mailing Address:**13460 SW 10TH STREET
SUITE 101
PEMBROOKE PINES, FL 33027 US**FEI Number: 65-0261088****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**OTTO, CHARLIE ESQ
2699 STIRLING RD
SUITE C-207
FORT LAUDERDALE, FL 33312 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	DIRECTOR
Name	MCCLAIN, BEVERLY
Address	901 SW 128 TERRACE, A-404
City-State-Zip:	PEMBROKE PINES FL 33027

Title	VP, TREASURER
Name	FABIAN, MARK
Address	1100 S W 128 TER, U-307
City-State-Zip:	PEMBROKE PINES FL 33027

Title	PRESIDENT
Name	ARBOLEDA, DIEGO
Address	1101 SW 128 TERRACE, C-413
City-State-Zip:	PEMBROKE PINES FL 33027

Title	SECRETARY
Name	CAMPS, MAGGIE
Address	1001 SW 128 TERRACE B409
City-State-Zip:	PEMBROKE PINES FL 33027

Title	DIRECTOR
Name	PANEQUE, MIRIAM
Address	1000 SW 128 TERRACE V108
City-State-Zip:	PEMBROKE PINES FL 33027

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: ARBOLEDA , DIEGO**PRESIDENT****02/06/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date