## 2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003890

Entity Name: GARNET CLUB AT SAPPHIRE LAKES CONDOMINIUM

ASSOCIATION, INC.

**Current Principal Place of Business:** 

CAMBRIDGE MANAGEMENT 2335 TAMIAMI TRAIL N 402 NAPLES, FL 34103

**Current Mailing Address:** 

CAMBRIDGE MANAGEMENT 2335 TAMIAMI TRAIL N SUITE #402 NAPLES, FL 34103 US

FEI Number: 65-0581150 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

CAMBRIDGE MANAGEMENT CAMBRIDGE MANAGEMENT 2335 TAMIAMI TRAIL N SUITE #402 NAPLES, FL 34103 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: BORA AGASTRA 04/21/2025

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title

Name SMITH, ROBERT Name LESHAW, IRWIN

Address CAMBRIDGE MANAGEMENT Address CAMBRIDGE MANAGEMENT

2335 TAMIAMI TRAIL N SUITE #402 2335 TAMIAMI TRAIL N SUITE #402

NAPLES FL 34103 NAPLES FL 34103 City-State-Zip: City-State-Zip:

Title **TREASURER** Title **SECRETARY** 

NORMAND, EDWARD YOKIE, MARY ELLEN Name Name

CAMBRIDGE MANAGEMENT 2335 TAMIAMI TRAIL NORTH SUITE Address Address 402

2335 TAMIAMI TRAIL N SUITE #402

CAMBRIDGE MANAGEMENT City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

Title **DIRECTOR** Name LAVALLE, RITA

Address 2335 TAMIAMI TRAIL NORTH SUITE

CAMBRIDGE MANAGEMENT

NAPLES FL 34103 City-State-Zip:

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.

04/21/2025 SIGNATURE: IRWIN LESHAW PRESIDENT

**FILED** Apr 21, 2025

Secretary of State

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