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May 05 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 755592 (3)

1. Corporation Name
L'AMBIANCE HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business: 23123 STATE ROAD 7 SUITE 350A BOCA RATON FL 33428 US
Mailing Address: P O BOX 2310 BOCA RATON FL 33427-2310 US

3. Date Incorporated or Qualified: 12/18/1980
3a. Date of Last Report: 04/02/1996

2. Principal Place of Business: 21 Suite, Apt. #, etc.
2a. Mailing Address: 26 PO Box 97-0069

4. FEI Number: 59-2082064
Applied For: Not Applicable

22. City & State: 23 Boca Raton, FL
28. City & State: 28 Boca Raton, FL

5. Certificate of Status Desired: \$8.75 Additional Fee Required

23. Zip: 24 Country: 25
29. Zip: 30 Country: 30

6. Election Campaign Financing: \$5.00 May Be Added to Fees

24. Zip: 25 Country: 29. Zip: 30 Country: 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
PALOMBI, GARY
23123 STATE ROAD 7
SUITE 350-A
BOCA RATON FL 33428

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	OV V/D <input type="checkbox"/> DELETE
NAME	AYTON, MARLEEN
STREET ADDRESS	6536 LAS FLORES DR
CITY-ST-ZIP	BOCA RATON FL
TITLE	SD S/D <input type="checkbox"/> DELETE
NAME	EVANS, WILLIAM
STREET ADDRESS	6120 VIA TIERRA DR.
CITY-ST-ZIP	BOCA RATON FL
TITLE	R P/D <input type="checkbox"/> DELETE
NAME	DALY, ROBERT
STREET ADDRESS	611 LAS FLORES DR
CITY-ST-ZIP	BOCA RATON FL
TITLE	D D <input type="checkbox"/> DELETE
NAME	PRYOR, BILL
STREET ADDRESS	6498 LAS FLORES
CITY-ST-ZIP	BOCA RATON FL
TITLE	T <input checked="" type="checkbox"/> DELETE
NAME	SPLAIN, GARY
STREET ADDRESS	6160 VIA TIERRA
CITY-ST-ZIP	BOCA RATON FL
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	LITZENBERGER, ROBERT
STREET ADDRESS	6434 LAS FLORES DRIVE
CITY-ST-ZIP	BOCA RATON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	Conrad O'Brien (D) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	6200 Via Tierra
1.3 STREET ADDRESS	Boca Raton FL
1.4 CITY-ST-ZIP	
2.1 TITLE	Tom Friedman (D) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	6632 Las Flores DR
2.3 STREET ADDRESS	Boca Raton FL
2.4 CITY-ST-ZIP	
3.1 TITLE	Romeo Demarco (D) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	6644 Las Flores DR
3.3 STREET ADDRESS	Boca Raton, FL
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, on an attachment with an address.

CR2E037 (9/96)