SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 10 MOUNT DUE ON OR BEFORE 8/7/80: \$61.25 (IF DIESOLVED, M ALM AMOUNT OUE TO REMAYATE: 1214_25 NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham FILED ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS 96 NOV -4 PM 1: 14 DOCUMENT # N9400002988 (3)
1. Corporation Name SECRETARY: OF STATE TALLAHASSEE, FLORIDA L'AMBIANCE Transition Committee, Inc. Principal Place of Business Mailing Address 240 S. Pineapple Ave. P.O. Box 49948 10th Floor Sarasota, Fl. 34230-6948 Sarasota, Fl. 34236 3. Date incorporated or Qualified 3a. Date of Last Report 06/16/1994 05/01/1995 2. Principal Place of Business 2a. Mailing Address 65-0506810 Applied For 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be Election Campaign Financing 28 23 Trust Fund Contribution Added to Fees Zip Country Zip Country 6. This corporation has liability for intangible tax under s.: 199.032, Yes No Florida Statutes 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent Ritchford, Malcolm J. 240 S. Pineapple Ave. Becker & Poliakoff, P.A. Street Address (P.O. Box Number is Not Acceptable) 630 S. Orange Avenue 10th Floor Šarasota, Fl. 34236 2ip Code 34236 City Sarasota 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 typed or presed name of reputated agent (CCL ENAVHENCY AGES Hours recent water good extend agent / Becker * 6 POLIAKOFF) SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12: TILLE 11 TITLE Change Addition Yablin, Harold NALE 12 NAME 240 S. Pineapple, 10th Floor STREET ADDRESS 1.3 STREET ADDRESS Sarasota, Fl. 34236 CITY-ST-ZIP 1.4 CITY-ST-ZIP 100001998251 -- 0 -11/07/96--01002--008 TITLE DELETE 2.1 TITLE Nespor, Ronald NAME 22 NAME 240 S. Pineapple Ave., 10th H LOS PRET ADDRESS STREET ADDRESS ****236.25 ****236.25 Sarasota, Fl. 34236 CITY - ST - ZIP 2. 4 CITY-ST-ZIP TITLE 3.1 TITLE Change Addition NAME Lipschutz, Stanton E. 32 NAME STREET ADDRESS 240 S. Pineapple Ave., 10th F. C) CONTRET ADDRESS CITY-ST-71P Sarasota, Fl. 34236 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change TIDE 6.1 TITLE NAME 62 NAME RECEIVED OCT 1 1 1996 STREET ADDRESS **6.3 STREET ADDRESS** 64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119,07(3)(k), Florida Statutes, 1 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 path; 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 Bleak 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

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1ESPOR 10-29-91