## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



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

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27 State City & State City & State G. Election Campaign Financing	1. Corporation Name AMBER HOMES, INC.  Principal Place of Business 533 BAYSIDE DR FT. MYERS FL 33919 US  Mailing Address 533 BAYSIDE DR FT. MYERS FL 33919 US						2. Data laceryousted or Qualified.   2n. Data of Last Report				
Sulte, Apr. #, etc. 2 2 2 2 2 2 3 3 3 2 4 2 5 City & State			<b>.</b>				, · ·	05/0			
Suite, Apt. #, etc.    Suite, Apt. #, etc.   27	-n ´	ce of Business	— "				4. FEI Number <b>65-0266145</b>		-	Applied For Not Applicable	
City & State    Country   Zip   Country   Zip   Country   8. This corporation has lability for intempoble tax un florid Statutes   Yes   KO No   S. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address   10. Name and Address   10. New Registered Agent   10. Name and Address   10. Name and Address   10. New Registered Agent	Suite, Apt. #,	etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		8.75	Additional Required	
Supplied   Country   Zep   Country   Zep   Country   Supplied	City & State		City & State	`					\$5.00	May Be	
### Part Address of Current Registered Agent  ### ZENTY, CAROL  ### S33 BAYSIDE DR  FORT MYERS FL 33919  ### City  ### FL  ### B4  ### City  ### Address (P.O. Box Number is Not Acceptable)  ### City  ### Ci	Zip	Country		Coi	untry			intangible tax u			
ZENTY, CAROL 533 BAYSIDE DR FORT MYERS FL 33919  1. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing or registered agent, or both, in the Strate of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the Strate of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607,0505, Florida Statutes.  Signature with, and accept the obligations of, Section 607,0505, Florida Statutes.  Signature with and accept the obligations of, Section 607,0505, Florida Statutes.  BOATTURE  Signature benefit or purpose of changing was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or incidency.  DATE  2. OFFICERS AND DIRECTORS  1.1 TITLE  2.2 TITLE  2.2 TITLE  2.2 TITLE  2.2 TITLE  3.3 FREET ADDRESS  THE SS31 HARBORAGE DR FORT MYERS FL  1.4 CITY-SI-2P  1.5 TAPE  1.			<u>-</u> <del>.</del>	30	,						
ZENTY, CAROL 533 BAYSIDE DR FORT MYERS FL 33919  1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changin or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered Agent agent and the ries already as a state of the corporation's board of directors. Thereby accept the appointment as registered Agent agent are already accept the appointment as registered Agent agent are already accept the appointment as registered Agent agent are already accept the appointment as registered Agent agent are already accept the appointment as registered Agent agent are already accept the appointment as registered Agent agent are already accept the appointment as registered Agent agent are already accept the appointment as registered Agent agent are already accept the appointment as registered Agent agent are already accept the appointment as registered Agent agent are already accept the appointment as registered Agent agent are already accept the appointment as registered Agent agent are already accept the appointment as registered Agent agent and accept agent accept accep		9. Name and Adoress of Currer	nt Registered Agent		81	Name	10. Name and Address of New F	legistered Ag	ent		
S33 BAYSIDE DR FORT MYERS FL 33919  84 City  FL B  1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registerable with, and accept the obligations of, Section 607.0505, Florida Statutes.  IGNATURE  Supplied Agent agrotion registed Agent agrotion registerable.  ILLE  D ZENTY, CAROL  S531 HARBORAGE DR FORT MYERS FL  D CRECT SY KC H  12 NAME  13 SIRRET ADDRESS  14 City  FL  B CRECT SY KC H  S531 HARBORAGE DR  13 SIRRET ADDRESS  14 City  FL  B CRECT SY KC H  ST SY C U S S E K  ST S S Y C U S S E K  ST S S Y C U S S E K  ST S S Y C U S S E K  ST S S S S S S S S S S S S S S S S S S							Haran /P.O. Boy Number is Not Assessed	26)		<del> </del>	
### Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changin 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, 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, 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, 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, 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, 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, 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, or hereby accept the appointment as registered agent. A public state of florida. Statutes.  ###################################					62	Street Ad	laress (P.O. box Number is Not Acceptat	ne)			
T. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changin 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, 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, or both, in the State of Florida Statutes.  IGNATURE    Superior bred or printed name of negatives agent and their agent agent and t	FORT MY	ERS FL 33919			83						
1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-hamed corporation submits this statement for the purpose of changin or registered agent, or both, in the State of Rovida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Rovida Statutes.  IGNATURE    Signature					84	City			B5 Zip	Code	
or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as regist familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.    Intermitted   Intermitted name of registered applied and their digitalized   Intermitted name of registered applied and termitalized   Intermitted name of registered applied and termitalized   Intermitted name of registered applied and termitalized   Intermitted name of registered app			10071500 51 11 01 11		<u> </u>						
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1Y-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 64. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida 5				640	IIY-SI	- Z:P	7 TO THE REAL PROPERTY AND THE PARTY AND THE				
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 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 607, Florida Statutes; a	TY-ST-ZIP	certify that the information supplied	with this filing is voluntarily furn	ished and	does	not qualif	v for the exemption stated in Section 119	07(3)(k) Florida	Statute	es I further	