FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

762429

(9)

AMBERWOOD LAKE CONDOMINIUM ASSOCIATION, INC.

Bincopal Place of Business Making Address 1617 AMBERWOOD CT API 17 MIRES IL 3000										
APT FT MYERS FL 33906	Principal Place of Business		Mailing Address					O HON BURN OF		a nen a nan 1981
## WERS FL 33906 2. Principal Place of Business 2a. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o Bens on 's 2b. Maying Address c / o 2b. Maying Address c /	16171 AMBERWOOD CT		16171 AMBERWOOD CT							
2. Principal Place of Business 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's 2s. Making Address c / o Bens on 's o Ben			*** * *							
22 Note of Business 28 Maring Address C / O Benson 8 A FEI Number Mac Applicate for Not Applicate for Not Applicate for Sulle, Apt #, citc 27 Sulle, Apt #, citc 28 Fort Myers FL 6. Election Compaign Financing S5.00 May be Added to Fees Address for Note Scott May be Added to Fees Address for Note Scott May be Added to Fees Address for Note Scott May be Added to Fees Scott May be Address of Current Registered Agent Sulley Apt Sulley	PI MTERS PL 33808		FI MIERO FL 33300-3201			3. Date Incorporated or Qualified 3a. Date				
Suite, Apt #, etc Suit	0 : Dringing D	Inno of Business	Lon Malling Address - J	N			, ,			
Sullo, ApJ, #, clc 20	H-4 '									
27 City & State 27 City & State 28 City & State 28 Fort Myers, FL 6 Election Campagor Financing \$5.00 May Bo Accept of Fees \$20 Country 2 29 3 3 9 0 7 \$0 Country 2 29 3 3 9 0 7 \$0 Country 2 29 3 3 9 0 7 \$0 Country 2 29 3 3 9 0 7 \$0 Country 2 29 3 3 9 0 7 \$0 Country 2 20 3 3 9 0 7 \$0 Country 2 20 3 3 9 0 7 \$0 Country 2 20 3 3 9 0 7 \$0 Country 2 20 3 3 9 0 7 \$0 Country 2 20 3 3 9 0 7 \$0 Country 2 20 3 3 9 0 7 \$0 Country 2 20 3 3 9 0 7 \$0 Country 2 20 3 3 9 0 7 \$0 Country 2 20 3 3 9 0 7 \$0 Country 2 20 Country 2 20 3 3 9 0 7 \$0 Country 2 20 Country 2 2 2 2 2 2 2 2 2				4						
20	22		27			1	5. Certificate of Status Desired			
Zpp							6. Election Campaign Financing	_	\$5.00	May Be
25 26 27 28 29 33907 30		Country	 							
DARWIN & BARB MCKEE 18171 AMBERWOOD CT APT 1 FT MYERS FL 33908 11. Pursuant to the provisions of Sections 817 0502 and 817 1508. Florids Statutes, the adopternamed corporation abumble this statement for the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent amount of the purpose of changing its				-	n .					
DARWIN & BARB MCKEE 16171 AMBERWOOD CT APT 1 FT MYERS FL 33908 84 Cay Fort Myers, FL 85 Zio Code 11. Pursuant to the provisions of Sections 617.0502 and 617 1508. Florida Statute, the above-named corporation submits this statement for the purpose of changing its registered office or registered papert, or both, the Shate of rolds. Such change was authorized by the competition board office or registered papert, or both, the Shate of rolds. Such change was authorized by the competition showed directors. I hereby accept the paperoliment as registered office or registered arms of registered arms	<u> </u>		100							
DARWIN & BARB MURKE 16171 AMBERWOOD CT APT 1 FT MYERS FL 33908 84 City Fort Myers, FL 85 32pc Code 3 907 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 solide or registered aport, or both with the State gladerida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered solide or registered aport to both with the State gladerida. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. City St. 2p NAME 14. Py D 15. STREET ADDRESS 16. City St. 2p 16. Cambuzza, Mario 16. Contress of Street Addition 16. Cambuzza, Mario 16. C				81	Name					
11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of Jagon, or both with the State of Sections 617 0508. Florids Statutes, the above-named corporation submits this statement for the purpose of Jagon, or both with the State of Sections 617 0508. Florids Statutes, the above-named corporation submits this statement for the purpose of Jagon of J	DARWIN & BARB MCKEE			82	Street			ble)		
FIT MYERS FL 33908 At City Fort Myers, FL 85 Zip Code 3 3 9 0 7 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 agent, or both, the State plot did. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, and agent the public flores of, Section 617.0503, Floridas Statutes. SIGNATURE SIGNATURE Delete 1.1 Intle Delete 1.1 Intle Delete 1.1 Intle ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 Intle Laport, BARRY 1.2 Intle ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD 1.2 Intle P/D XX Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD 2.2 Intle ZAMAE Gambuzza, Mario 1.4 City Fort Myers, FL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD 2.2 Intle ZAMAE Gambuzza, Mario 1.4 City Fort Myers, FL T/D XX Change Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE SD D DELETE 1.1 Intle Laport, BARRY 2.2 Intle ZAMAE Gambuzza, Mario 1.4 City Fort Myers, FL T/D XX Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE SD XX Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE SD XX Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE SD XX Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE T/D XX Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE VD DELETE ST TITLE VD DELETE ST TITLE CONTEST ADDRESS STREET A		MBERWOOD CT		12						
11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Fords Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered graph, or both if the State of order Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered spent am business of registered graph and the line state of the State of Order Statutes. SIGNATURE				83						
11. PURSUANT TO THE PROVISIONS OF SECTIONS \$17 0500 and \$17 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent a provision of sections \$17 0500 and \$17 0500. Florids Statutes agent 1 am fault of the purpose of changing its registered agent 1 am fault of the purpose of changing its registered office or registered agent and set pi the object and set pi the object and set pi the object agent and set pi the object and set pi the object and set pi the object agent and set pi the object and set pi t	FT MYEI	RS FL 33908		84	City	For	rt Mvers.		85 Zip	Code
Signatural Signam	11. Pursuant t	the above	-named		-	Durpose o	f changing	907 its registered		
Signatural Signam	office or registered agent, or both in the State of Polida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the appointment as registered									
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12										
D		· · · · · · · · · · · · · · · · · · ·			ni signature	required				
NAME PAPPAS, MARION 28 CALIFORNIA DRIVE 1.3 STREET ADDRESS CITY-ST-ZIP CONTESTER NY 1.4 CITY-ST-ZIP CITY ST-ZIP CITY ST-							ADDITIONS/CHANGES TO OFF	CERS AND		
STREET ADDRESS 28 CALIFORNIA DRIVE 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP			C precit						□ rusu0e	LJ Adultion
ACITY-ST-ZIP		· .								
Title										
STREET ADDRESS CITY-ST-ZIP MIDDLEPORT NY 2.3 STREET ADDRESS CITY-ST-ZIP FORT Myers, FL SD MEDIAN, PATRICIA STREET ADDRESS CITY-ST-ZIP MIDDLEPORT NY DELETE SD MIDDLEPORT NY 32 NAME Poelker, John 16 081 Amberwood Lake Ct., #D2 Fort Myers, FL TITLE D DELETE 41 TITLE T/D NAME GELDER, ROBERT 10780 TELEGRAPH RD. NAME NOTONALD, PATRICIA STREET ADDRESS CITY-ST-ZIP NAME MCDONALD, PATRICIA STREET ADDRESS STREET A			☐ DELETE			P/	D		XX Change	☐ Addition
DELETE SD	NAME					Gan	ambuzza, Mario			
DELETE SD	STREET ADDRESS									1
HEIDEMAN, PATRICIA STREEI ADDRESS CITY-SI-ZIP MIDDLEPORT NY DELETE D GELDER, ROBERT STREEI ADDRESS CITY-SI-ZIP MEDINA NY TILE VD MCDONALD, PATRICIA SIREEI ADDRESS SIREEI ADDRESS SIREEI ADDRESS SIREEI ADDRESS CITY-SI-ZIP MCDONALD, PATRICIA SIREEI ADDRESS SIRE									****	
STREET ADDRESS CITY-ST-ZIP MIDDLEPORT NY 33 STREET ADDRESS CITY-ST-ZIP MIDDLEPORT NY 34 CITY-ST-ZIP FORT Myers, FL T/D XX Change Addition			☐ DELETE		1	•		:	XX Change	L Addition
MIDDLEPORT NY 34.CHY-ST-ZIP Fort Myers, FL		·						. 0 0+	#n	2
Title					1.7IP	For	t Myers. FL		· , #D	£.
NAME GELDER, ROBERT 4.2 NAME 4.3 STREET ADDRESS MEDINA NY 4.4 CITY-ST-ZIP MEDINA NY 4.4 CITY-ST-ZIP MCDONALD, PATRICIA 5.1 TITLE V D MCDONALD, PATRICIA 5.2 NAME Hurley, Charles SIREET ADDRESS PECT ST. 5.3 STREET ADDRESS 16151 Amberwood Lake Court, #H4 CITY-ST-ZIP Fort Myers, FL Change Addition CONTE, ANDREA B.2 NAME Addition Additi			DELETE						X X Change	Addition
MEDINA NY	NAME			4. 2 NAME		-,	=	•	_	
TILE VD DELETE 51 TITLE V/D XX Change Addition NAME MCDONALD, PATRICIA 52 NAME SIREET ADDRESS PECT ST. 5.3 STREET ADDRESS 16151 Amberwood Lake Court, #H4 CITY-ST-ZIP MIDDLEPORT NY 5.4 CITY-ST-ZIP FORT Myers, FL TILE D D DELETE 6.1 TITLE NAME CONTE, ANDREA 52 NAME	STREET ADDRESS			4.3 STREET ADDRESS						
NAME MCDONALD, PATRICIA SIREET ADDRESS PECT ST. CITY-ST-ZIP MIDDLEPORT NY DELETE D D DELETE S2 NAME Hurley, Charles 16151 Amberwood Lake Court, #H4 54 City-ST-ZIP Fort Myers, FL CONTE, ANDREA 61 TITLE D CONTE, ANDREA				· · · · · · · · · · · · · · · · · · ·						
STREET ADDRESS CHY-SI-ZIP PECT ST. MIDDLEPORT NY 5.3 STREET ADDRESS 5.3 STREET ADDRESS FORT Myers, FL 5.4 CHY-SI-ZIP FORT Myers, FL CONTE, ANDREA 5.3 STREET ADDRESS FORT Myers, FL Change Addition 6.2 NAME			☐ DELETE						XX Change	□ Addition
CITY-SI-ZIP MIDDLEPORT NY 5.4 CITY-SI-ZIP FORT Myers, FL THLE D DELETE 6.1 TITLE NAME CONTE, ANDREA 52 NAME CONTE, ANDREA										Her I
Title D DELETE 6.1 Title Change Addition NAME CONTE, ANDREA 62 NAME Change Addition	ľ				NUMESS	For	or minerwood bak T Mvers, RT	e cor	urt,	IF H 4
NAME CONTE, ANDREA 52 NAME			DELETE		-zir		·, cro, ru		Change	Addition
	NAME	_								
147) (144 (A) 7) (P 167	STREET ADDRESS	1195-A YOUNGS RD.		6.3 STREET #	ADDRESS					

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, or on an attachment with an address.

SIGNATURE: /

and Confuger to The dear

1-10-97 (941)277-0718

FILED

Mar 06 1997 8:00am

Secretary of State

(96/6) (SEC)

Amberwood Lake Condominium Association, Inc.

D

Burton, Geoffrey 16141 Amberwood Lake Court, #G1 Fort Myers, FL