## **2000 UNIFORM BUSINESS REPORT (UBR)**

## **FILED** Feb 26, 2000 8:00 am Secretary of State DOCUMENT # **730748** 1. Entity Name AMBASSADORS I CONDOMINIUM ASSOCIATION, INC. 02-26-2000 90010 033 \*\*\*\*61.25 Principal Place of Business Mailing Address 4511 S OCEAN BLVD. 4511 S OCEAN BLVD. HIGHLAND BEACH FL 33487 HIGHLAND BEACH FL 33487-4276 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-1594753 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SEGUSO, RICHARD C. 4505 SOUTH OCEAN BLVD. SUITE 302 City Zin Code HIGHLAND BEACH FL 33487 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Pavable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Addition TITLE ☐ Delete TITLE ☐ Change D NAME POMERANTZ, NATHAN NAME Luce, Dean STREET ADDRESS STREET ADDRESS 4505 S OCEAN BLVD, Unit 208 4511 S. Ocean Blvd., Unit 703 CITY-ST-ZIP CITY-ST-ZIP HIGHLAND BCH, FL 00000 Highland Bch, FL 33487 Addition TITLE D ☐ Delete TITLE Change D NAME GIORDANO, JOSEPH NAME Siegel, Richard 4505 S. Ocean Blvd, Unit 106 STREET ADDRESS STREET ADDRESS 4505 S OCEAN BLVD, Unit 305 CITY-ST-ZIP CITY-ST-ZIP HIGHLAND BEACH FL Highland Bch, FL 33487 TITLE ☐ Delete TITLE ☐ Change ☐ Addition D MAMBERG, WARREN NAME Lewis, Steven STREET ADDRESS 4511 S. OCEAN BLVD. UNIT 706 STREET ADDRESS 4505 S. Ocean Blvd, Unit 608 CITY-ST-ZIP CITY-ST-ZIP HIGHLAND BCH FL 33487 Highland Bch, FL 33487 ☐ Addition ☐ Delete TITLE Change TITLE NAME HURST, KENNETH J NAME STREET ADDRESS STREET ADDRESS 4505 S. OCEAN BLVD. UNIT 408 CITY-ST-ZIP CITY-ST-ZIP HIGLAND BEACH FL 33487 ☐ Delete TITLE Change ☐ Addition TITLE NAME SEGUSO, RICHARD NAME STREET ADDRESS STREET ADDRESS 4505 OCEAN BLVD 302 CITY-ST-ZIP CITY-ST-ZIP HIGHLAND BCH. FL 90000-x <u>33487</u> Addition Delete TITLE Change TITLE KANE, PAUL SR NAME NAME STREET ADDRESS STREET ADDRESS 4505 S. OCEAN BLVD. #708 CITY-ST-ZIP CITY-ST-ZIP HIGHLAND BCH. FL 33487

, with all other like empowered Warren Mamberg, President 2/2/00 Date (561) 272-7001 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

changed, or on an attachment with an address,

I 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 report or supplemental 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 10 or Block 11 if