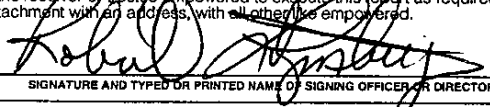


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90557 024 ****61.25

DOCUMENT # 755592 1. Entity Name L'AMBIANCE HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business 951 BROKEN SOUND PKY., #250 BOCA RATON, FL 33487 US			Mailing Address 951 BROKEN SOUND PKY., #250 BOCA RATON, FL 33487 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2082064	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COMMUNITY ASSOCIATION SERVICES, INC. 951 BROKEN SOUND PKY., #250 BOCA RATON, FL 33487				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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. I am familiar with, and accept the obligations of registered agent.				FL	
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEVINE, PETER 6402 LAS FLORES DRIVE BOCA RATON, FL 33433	☒ Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MACIA, Dolores 6660 LA PINA Court Boca Raton, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LITZENBERGER, BOB 6434 LAS FLORES DRIVE BOCA RATON, FL 33433	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Luger, Norman 6479 Las Flores Drive Boca Raton, FL 33433	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD COFFEY, SCOTT 6190 VIA TIERRA BOCA RATON, FL 33433	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Stine, Gil 6539 Las Flores Drive Boca Raton, FL 33433	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KRAUS, CHARLES 6570 ALTURA PLACE BOCA RATON, FL 33433	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Kaplan, Ronald 6458 Las Flores Drive Boca Raton, FL 33433	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EVANS, WILLIAM 6120 VIA TIERRA BOCA RATON, FL 33433	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Evans, William 6120 Via Tierra Boca Raton, FL 33433	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Persichini, David 6656 Las Flores Drive Boca Raton, FL 33433	☐ Change ☒ Addition
12. 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 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date: 4/21/05					
Daytime Phone #					