2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 03, 2006
Secretary of State

DOCUMENT# 730748

Entity Name: AMBASSADORS I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4511 S OCEAN BLVD.
HIGHLAND BEACH, FL 33487 US

New Principal Place of Business:

Current Mailing Address:

4511 S OCEAN BLVD.
HIGHLAND BEACH, FL 33487

New Mailing Address:

FEI Number: 59-1594753 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LEWIS, STEVE
4505 SOUTH OCEAN BLVD
SUITE 608
HIGHLAND BEACH, FL 33487 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	P D	( ) Delete
Name:	LEWIS, STEVE	
Address:	4505 S OCEAN BLVD UNIT 608	
City-St-Zip:	HIGHLAND BEACH, FL	
Title:	V D	( ) Delete
Name:	SWEADE, ROBERT	
Address:	4505 S OCEAN BLVD UNIT 201	
City-St-Zip:	HIGHLAND BEACH, FL	
Title:	V D	( ) Delete
Name:	MAMBERG, WARREN	
Address:	4511 S. OCEAN BLVD. UNIT 706	
City-St-Zip:	HIGHLAND BCH, FL 33487	
Title:	T D	( ) Delete
Name:	LEVINE, MELVINE	
Address:	4511 S. OCEAN BLVD. UNIT 708	
City-St-Zip:	HIGLAND BEACH, FL 33487	
Title:	S D	( ) Delete
Name:	GUIDO, MARCEL	
Address:	4505 OCEAN BLVD 504	
City-St-Zip:	HIGHLAND BEACH, FL 33487	
Title:	D	( ) Delete
Name:	PADRINO, REINALDO	
Address:	4511 S. OCEAN BLVD, UNIT 1002	
City-St-Zip:	HIGHLAND BCH., FL 33487	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE LEWIS PRES 07/03/2006

Electronic Signature of Signing Officer or Director — Date