

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730748

FILED
Mar 27, 2009
Secretary of State

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:

4511 S OCEAN BLVD.
OFFICE
HIGHLAND BEACH, FL 33487

FEI Number: 59-1594753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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: HIGHLAND 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 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

PD

03/27/2009

Electronic Signature of Signing Officer or Director

Date