2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2000 8:00 am
Secretary of State
02-25-2000 90013 008 ****61.25

DOCUMENT # 730749

1. Entity Name

AMBASSADORS EAST CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3215 S OCEAN BLVD HIGHLAND BCH FL 33487	3215 S OCEAN BLVD HIGHLAND BCH FL 33487-2505

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1713210 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MOLLENGARDEN, PETER S ESQUIRE
BECKER & POLIAKOFF, P.A.
450 S. AUSTRAILIAN AVE., 7TH FLOOR
W. PALM BCH. FL 33401

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LOWE, ELEANOR 3215 S OCEAN BLVD, #907 HIGHLAND BCH, FL 00000 33487	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD RITA HICKS 3215 SO OCEAN BLVD HIGHLAND BEACH FL 33487	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROGERS, JOHN P 3218 S OCEAN BLVD, #1008 HIGHLAND BCH. FL 33487	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1STVP PHIL MILLER 3301 SO. OCEAN BLVD HIGHLAND BEACH FL 33487	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CLARO, THOMAS A 3215 S OCEAN BLVD, #505 HIGHLAND BCH, FL 00000 33487	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FRANK MORENO 3221 SO OCEAN BLVD HIGHLAND BEACH FL 33487	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DONALD SKOLNICK 3201 SO OCEAN BLVD HIGHLAND BEACH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ED D'AMATO 3301 SO OCEAN BLVD HIGHLAND BEACH FL 33487	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHERBO, LINDA 3215 S OCEAN BLVD, #404 HIGHLAND BEACH FL 33487	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EVELYN DONATO 3301 SO OCEAN BLVD HIGHLAND BEACH FL 33487	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LAUFER, HARRY 3215 S OCEAN BLVD, #308 HIGHLAND BEACH FL 33487	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROBERT LOWE 3221 SO OCEAN BLVD HIGHLAND BEACH FL 33487	☐ Change ☒ Addition

CR2E037 (9/99)

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 REQUIRED 2/17/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #