

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 753327 (6)

1. Corporation Name

THE VILLAS OF AMBERWOOD CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

10070 NW 41 ST.
MIAMI FL 33178

10070 NW 41 ST.
MIAMI FL 33178

3. Date Incorporated or Qualified
07/14/1980

3a. Date of Last Report
08/14/1995

2. Principal Place of Business

2a. Mailing Address

21

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4. FEI Number
59-2099483

Applied For
Not Applicable

Suite, Apt #, etc.

Suite, Apt #, etc.

22 City & State

27 City & State

5. Certificate of Status Desired \$8.75 Additional Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24

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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FRANCIS, RONALD L
10194 NW 41
MIAMI FL 33178

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Ronald L. Francis
Signature, typed or printed name of registered agent and title, if applicable

President and Director
Title

21 Jan 96
DATE

(NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD FRANCIS, RONALD L 10194 NW 41 ST MIAMI FL	<input type="checkbox"/> DELETE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SD MCNAMARA, CARY 10034 NW 41 ST MIAMI FL	<input type="checkbox"/> DELETE	1.2 NAME
STREET ADDRESS	VPD VILLANE, LOURDES LALLAVE 10190 NW 41 ST MIAMI FL	<input type="checkbox"/> DELETE	1.3 STREET ADDRESS
CITY-ST-ZIP	TD DIAZ, JOSE D 101000 NW 41 ST MIAMI FL	<input checked="" type="checkbox"/> DELETE	1.4 CITY-ST-ZIP
TITLE	D MENA, ROBERT 10036 NW 41 ST MIAMI FL	<input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			2.2 NAME
STREET ADDRESS			2.3 STREET ADDRESS
CITY-ST-ZIP			2.4 CITY-ST-ZIP
TITLE			3.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			3.2 NAME
STREET ADDRESS			3.3 STREET ADDRESS
CITY-ST-ZIP			3.4 CITY-ST-ZIP
TITLE			4.1 TITLE <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			4.2 NAME
STREET ADDRESS			4.3 STREET ADDRESS
CITY-ST-ZIP			4.4 CITY-ST-ZIP
TITLE			5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5.2 NAME
STREET ADDRESS			5.3 STREET ADDRESS
CITY-ST-ZIP			5.4 CITY-ST-ZIP
TITLE			6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME
STREET ADDRESS			6.3 STREET ADDRESS
CITY-ST-ZIP			6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Ronald L. Francis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

21 Jan 1996
Date

Date

305 243 2425
Daytime Phone #

CR2E037 (12/95)