

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2006 8:00 am
Secretary of State

07-07-2006 90004 005 ****61.25

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DOCUMENT # 755180 1. Entity Name AMBASSADOR HOUSE CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 777 W LANCASTER ROAD ORLANDO, FL 32809			Mailing Address 777 W LANCASTER ROAD ORLANDO, FL 32809 US		
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 59-2243429	
5. Certificate of Status Desired ☐				☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
WEAN & MALCHOW 646 E COLONIAL DR. ORLANDO, FL 32803			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. I am familiar with, and accept the obligations of registered agent.					
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 September 6, 2006		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	GOMEZ, MARIA		NAME		
STREET ADDRESS	777 W. LANCASTER ROAD B-38		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 32809		CITY-ST-ZIP		
TITLE	P	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	BAILEY, MARDELLE		NAME		
STREET ADDRESS	777 W. LANCASTER RD., B-41		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 32809		CITY-ST-ZIP		
TITLE	T	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	JANOSKA, GARY		NAME		
STREET ADDRESS	777 W. LANCASTER ROAD #A-10		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 32809		CITY-ST-ZIP		
TITLE	VP	☐ Delete	TITLE	☒ Change ☐ Addition	
NAME	CARDENAS, ROBERT		NAME	CARDENAS ROBERT	
STREET ADDRESS	777 W LANCASTER RD., #A-13		STREET ADDRESS	777 W LANCASTER Rd APT A13	
CITY-ST-ZIP	ORLANDO, FL 32809		CITY-ST-ZIP	ORLANDO, FL 32809	
TITLE	S	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	GAHAGAN, JONI		NAME		
STREET ADDRESS	777 W LANCASTER RD., #A-13		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 32809		CITY-ST-ZIP		
TITLE	D	☒ Delete	TITLE	☒ Change ☐ Addition	
NAME	PIRERA, JOSEPH		NAME	LOTT PHIL	
STREET ADDRESS	777 W LANCASTER RD., #F-80		STREET ADDRESS	777 W LANCASTER Rd-A-H104	
CITY-ST-ZIP	ORLANDO, FL 32809		CITY-ST-ZIP	ORLANDO, FL 32809	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: X			7-3-06		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		