

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **755592** (3)
1. Corporation Name
L'AMBIANCE HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business: **23123 STATE ROAD 7 SUITE 350A BOCA RATON FL 33428 US**
Mailing Address: ~~P O BOX 2310 BOCA RATON FL 33427-9310 US~~ **H.M.C. P.O. Box 97-0069 Boca Raton, FL 33497-0069**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/18/1980	3a. Date of Last Report 05/01/1995
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2082064	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
PALOMBI, GARY 23123 STATE ROAD 7 SUITE 350-A BOCA RATON FL 33428				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83	City		
				84	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 Gary Palombi *[Signature]* Date 4/1/96
Signature, typed or printed name of registered agent and Notary Public (NOTE: Registered Agent's signature must be in ink on a separate sheet of paper.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92	
TITLE	DV	1.1 TITLE	Director
NAME	AYTON, MARLEEN	1.2 NAME	Kathy Klock
STREET ADDRESS	6536 LAS FLORES DR	1.3 STREET ADDRESS	6540 Quintana Place
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	Boca Raton, FL
TITLE	SD	2.1 TITLE	
NAME	EVANS, WILLIAM	2.2 NAME	
STREET ADDRESS	6120 VIA TIERRA DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	
TITLE	P	3.1 TITLE	
NAME	DALY, ROBERT	3.2 NAME	
STREET ADDRESS	611 LAS FLORES DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	PRYOR, BILL	4.2 NAME	
STREET ADDRESS	6498 LAS FLORES	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	4.4 CITY-ST-ZIP	
TITLE	T	5.1 TITLE	
NAME	SPLAIN, GARY	5.2 NAME	
STREET ADDRESS	6160 VIA TIERRA	5.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	
NAME	LITZENBERGER, ROBERT	6.2 NAME	
STREET ADDRESS	6434 LAS FLORES DRIVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	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: *[Signature]* **ROBERT DALY** Date: 4/1/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)