2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006 8:00 am
Secretary of State
04-25-2006 90112 044 ****61.25

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1. Entity Name
AMBERLEY PARK HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4250 ALAFAYA TR, STE 212 OVIEDO, FL 32765	4250 ALAFAYA TR, STE 212 OVIEDO, FL 32765

40062014

03102006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
PMB 345 4250 Alafaya TR.	PMB 345 4250 Alafaya TR.
Suite, Apt. #, etc.: 212	Suite, Apt. #, etc.: 212
City & State: Oviedo, FL	City & State: Oviedo, FL
Zip: 32765 Country:	Zip: 32765 Country:

4. FEI Number: 57-1139177 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BURNSIDE, LILLY
4250 ALAFAYA TR, STE 212
OVIEDO, FL 32765

7. Name and Address of New Registered Agent

Name: Lilly Burnside c/o Reliable Property Managers
Street Address (P.O. Box Number is Not Acceptable): PMB 345 4250 Alafaya Tr., Suite 212
City: Oviedo **FL** Zip Code: 32765

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) DATE

Filing Fee is $61.25
Due by May 1, 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D YAMIN, GUSTARO 3255 AMSIRLEY PARK CR KISSIMMEE, FL 34743	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Yamin, Gustavo 3255 Amberley Park Cir. Kissimmee, FL 34743	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DEPAULO, THOMAS 3306 AMBERLEY PARK CR KISSIMMEE, FL 34743	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Perera, Gorettie 3291 Amberley Park CR. Kissimmee, FL 34743	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MARTINEZ, EDWIN 3211 AMBERLEY PARK CR. KISSIMMEE, FL 34743	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~Secretary~~ President Carl Thompson 3205 Amberley Park CR. Kissimmee, FL 34743	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Carl Thompson 3/31/2006 407-791-4629
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #