2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002896

FILED Apr 21, 2010 Secretary of State

Entity Name: AMBERLEY PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

225 S. WESTMONTE DRIVE 225 S WESTMONTE DR

#3310 STE #3310

ALTAMONTE SPRINGS, FL 32714 ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address: New Mailing Address:

P.O. BOX 162147 PO BOX 162147

ALTAMONTE SPRINGS, FL 32716 US ALTAMONTE SPRINGS, FL 32716 US

FEI Number: 57-1139177 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WOMACK, ELLEN R VISTA COMMUNITY ASSOCIATION MANAGEMENT 225 S. WESTMONTE DRIVE 225 S WESTMONTE DR

225 S. WESTMONTE DRIVE 225 S WEST #3310 #3310

ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32714 US

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: ELLEN R WOMACK 04/21/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: THOMPSON, CARL

Address: 3205 AMBERLEY PARK CIR City-St-Zip: KISSIMMEE, FL 34743

Title: TD

Name: MARTINEZ, EDWIN
Address: 3211 AMBERLEY PARK CR.
City-St-Zip: KISSIMMEE, FL 34743

Title: SD

 Name:
 CRUZ, TERELINA

 Address:
 3295 AMBERLEY PRK CIR

 City-St-Zip:
 KISSIMMEE, FL 34743

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CARL THOMPSON PD 04/21/2010