## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N05000010282

TI FILED
Oct 09, 2008
Secretary of State

Entity Name: AMBER POINTE HOMEOWNERS ASSOCIATION, INC.

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

LELAND MANAGEMENT 5955 T.G. LEE BLVD SUITE 300 ORLANDO, FL 32822 US

Current Mailing Address: New Mailing Address:

LELAND MANAGEMENT 5955 T.G. LEE BLVD SUITE 300 ORLANDO, FL 32822 US

FEI Number: 20-4548144 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:

LELAND MANAGEMENT 5955 T.G. LEE BLVD SUITE 300 ORLANDO, FL 32822 US

**OFFICERS AND DIRECTORS:** 

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:

Electronic Signature of Registered Agent Date

## Electronic eignature of registered /

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

Name: BRINDLEY, JEFF Name: Address: 9102 SOUTHPARK CENTER LOOP, 2ND FL STE 200 Address:

Address: 9102 SOUTHPARK CENTER LOOP, 2ND FL STE 200 Address: City-St-Zip: ORLANDO, FL 32819 US City-St-Zip:

Title: PD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 CAMP, JEREMY
 Name:

 Address:
 9102 SOUTHPARK CENTER LOOP, 2ND FL STE 200
 Address:

 City-St-Zip:
 ORLANDO, FL 32819 US
 City-St-Zip:

Title: STD ( ) Delete Title: STD (X) Change ( ) Addition

Name: SPECTOR, SHARLENE Name: MEIER, JOSEPH

Address: 9102 SOUTHPARK CENTER LOOP, 2ND FL STE 200 Address: 9102 SOUTHPARK CENTER LOOP, 2ND FL STE 200

City-St-Zip: ORLANDO, FL 32819 US City-St-Zip: ORLANDO, FL 32819 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JEREMY CAMP PD 10/09/2008