FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

(6)

DIVISION OF CORPORATIONS

1996

N30335

DOCUMENT #
1. Corporation Name THE VILLAS OF AMBERWOOD III CONDOMINIUM ASSOCIAT ION, INC.

Mailing Address Principal Place of Business



9916 NW 41 S MIAMI FL 3313 US		9916 NW 41 ST. MIAMI FL 33178 US		Date Incorporated or Qualifier	d 3a. Date of Last Report
				01/25/1989	05/01/1995
2. Principal Pla		2a. Mailing Address		4. FEI Number	Applied For
	NW YITST	26 9914 NU	1 41" 57	65-0101591	Not Applicable
Suite, Apt. #	·	Suite, Apt. #, etc. 27 MIAMI FL		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	_	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 33 D	Country 25 DAA	Zp Zp Z) Z	Country 30 LCA	This corporation has liability Florida Statutes	for intangible tax under s. 199.032, Yes \sum No
	9. Name and Address of Curren	Registered Agent		10. Name and Address of Ne	w Registered Agent
			81 Na	THE OMAN BOREUS	
FILIZ, YA			82 Str	eet Address (P.O. Box Number is Not Accep	otable)
				9914 NW 41 - ST	
MIAMI FL	. 33178		83		
			84 City		FL 85 Zip Code
11 Pursuant t	to the provisions of Sections 617.0502	and 617.1508. Florida Statute	s, the above-name	MIAM doorporation submits this statement for the	purpose of changing its registered office
or register	ed agent, or both, in the State of Floric th, and accept the obligations of, Secti	ta. Such change was authorize	ed by the corporation	on's board of directors. I hereby accept the a	appointment as registered agent. I am
1	MAR BORGES		1		4/7/56
SIGNATURE	Signature typed or printed name of registered agent	and title if applicable. [NO	Heg stered Agent store	(ure replyred when reinstating)	DATE
12.	OFFICERS AND		13.		OFFICERS AND DIRECTORS IN 12 Change
TITLE	DP	DELETE	1.1 TITLE	PRISIONI	Change E Roomon
NAME	YUVUZ, FILIZ 9916 NW 41 ST.		1.2 NAME 1.3 STREET ADDR	SMAR BOYLGES	
STREET ADDRESS	MIAMI FL		1.4 CITY - ST - ZIP	MIAN 12 33178	
CITY-ST-ZIP TITLE	SD	DELETE	21 TITLE	7.174 10 33176	☐ Change ☐ Addition
NAME	BUNGER, SUSAN		2.2 NAME		
STREET ADDRESS	9902 NW 41 ST		2.3 STREET ADDR	ESS	
CITY-ST-ZIP	MIAMI FL		2 4 CITY - ST - ZIP		
TITLE	VD	DELETE	3 1 TITLE		Change Addition
NAME	CABRERA, EDWIN		3.2 NAME		
STREET ADDRESS	9926 NW 41 STR Miami Fl		3 3 STREET ADDR		
CITY-ST-ZIP TITLE	TD TD	DELETE	3 4. CITY-ST-ZIP	BOARD MEMBER	Change Addition
NAME	YAVUZ, FILIZ		4 2 NAME	TIMOTHY LINDINSER	<i>A</i> . –
STREET ADDRESS	9916 NW 41ST STREET		4.3 STREET ADDR		
CITY-ST-ZIP	MIAMI FL		4.4 CITY - ST - ZIP	MIANI FL 33178	
TITLE	VD	DELETE	5.1 TITLE		Change Addition
NAME	BRACHO, ROXANA		5.2 NAME		
STREET ADDRESS	9928 NW 41 ST.		5.3 STREET ADDR		
CITY - ST - ZIP	MIAMI FL	- Drugge	5.4 CITY - ST - ZIP		☐ Change ☐ Addition
TITLE	TD LOWE MODALA	DELETE	61 TITLE		
NAME	LOWE, NORMA 9912 NW 41 STREET		62 NAME	iree	
STREET ADDRESS	MIAMI FL		6.3 STREET ADDR	iess	
CITY-ST-ZIP	INI/ONI 1 C		6 4 CITY-ST-ZIP		440 07/00/04 Fleride Otet des I further

14. Ido 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 13 if changed, or on an attachment with an address.