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Mar 31 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **N30738** **(1)**

1. Corporation Name
AMBERLY VILLAGE I ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4100 CORPORATE SQUARE SUITE 157 NAPLES FL 33942 US	4100 CORPORATE SQUARE SUITE 157 NAPLES FL 34104-4704 US

3. Date Incorporated or Qualified: 02/16/1989
3a. Date of Last Report: 02/07/1996

2. Principal Place of Business	2a. Mailing Address
21 c/o R&P Property Mgmt.	26 c/o R&P Property Mgmt.
Suite, Apt. #, etc. 22 265 Airport Road South	Suite, Apt. #, etc. 27 265 Airport Rd. South
City & State 23 NAPLES, Florida	City & State 28 NAPLES Florida
Zip 24 34104 Country 25 USA	Zip 29 34104 Country 30 USA

4. FEI Number: 65-0099639 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CHINN, BUTCH
4100 CORPORATE SQUARE
SUITE 157
NAPLES FL 33942

10. Name and Address of New Registered Agent

81 Name: DENNIS CARROLL c/o R&P Property Mgmt.
82 Street Address (P.O. Box Number is Not Acceptable): 265 AIRPORT ROAD SOUTH
83 NAPLES
84 City: FLORIDA FL 85 Zip Code 34104

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: Dennis Carroll
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☒ DELETE	1.1 TITLE	D	☐ Change ☐ Addition
NAME	GOODALE, CHARLIE		1.2 NAME	BETTY ANNE HALL	
STREET ADDRESS	3675 AMBERLY CIRCLE C106		1.3 STREET ADDRESS	3695 AMBERLY CIRCLE #E201	
CITY-ST-ZIP	NAPLES FL		1.4 CITY-ST-ZIP	NAPLES, Florida 34112	
TITLE	P	☒ DELETE	2.1 TITLE	D	☐ Change ☐ Addition
NAME	MACLEAN, DON		2.2 NAME	JAMES RAHNER	
STREET ADDRESS	3655 AMBERLY CIRCLE A205		2.3 STREET ADDRESS	3675 AMBERLY CIRCLE C307	
CITY-ST-ZIP	NAPLES FL		2.4 CITY-ST-ZIP	NAPLES, Florida 34112	
TITLE	ST	☐ DELETE	3.1 TITLE		☒ Change ☐ Addition
NAME	HERBST, CHUCK		3.2 NAME	CHARLES HERBST	
STREET ADDRESS	3685 AMBERLY CIRCLE #D307		3.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		3.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	4.1 TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	SALING, GUSTAV A		4.2 NAME		
STREET ADDRESS	3705 AMBERLY CIRCLE F202		4.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE	VICE PRESIDENT	☒ Change ☐ Addition
NAME	KRONSTEDT, MONROE		5.2 NAME		
STREET ADDRESS	3665 AMBERLY CIRCLE B302		5.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: [illegible]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0059204