

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90390 015 *****61.25

DOCUMENT # N30738

1. Entity Name

AMBERLY VILLAGE I ASSOCIATION, INC.



Principal Place of Business

**C/O GREENWOOD MANAGEMENT SERVICES
5533 GREENWOOD CIRCLE
NAPLES FL 34112
US**

Mailing Address

**C/O GREENWOOD MANAGEMENT SERVICES
5533 GREENWOOD CIRCLE
NAPLES FL 34112
US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0099639**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SLATER, JOHN H
GREENWOOD MANAGEMENT SERVICES, INC.
5533 GREENWOOD CIRCLE
NAPLES FL 34112**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW: FEE IS \$61.25

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

TITLE **PD** ☐ Delete
NAME **PRENADRE, RICHARD F**
STREET ADDRESS **3675 AMBERLY CIRCLE - SUITE C103**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE **VPD** ☐ Delete
NAME **ADEMA, HENRY**
STREET ADDRESS **3165 AMBREY CIRCLE -SUITE B205**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE **TD** ☐ Delete
NAME **BORIEO, KEN**
STREET ADDRESS **6385 AMBERLY CIRCLE -SUITE D304**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE **D** ☒ Delete
NAME **BURNS, DON**
STREET ADDRESS **3595 AMBERLY CIRCLE -SUITE E205**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE **D** ☐ Delete
NAME **BROWN, ROGER**
STREET ADDRESS **3655 AMBERLY CIRCLE -SUITE A103**
CITY-ST-ZIP **NAPLES FL 34112**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME **PREMERE**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **3665**
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **S/K/D BORIEO, KAREN**
STREET ADDRESS **3635**
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **D EMMETT, GEORGE**
STREET ADDRESS **3165 AMBERLY CIRCLE, SUITE D 208**
CITY-ST-ZIP **NAPLES, FL 34112**

12. I 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 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:

Signature of Richard F. Prenadre
Richard F. Prenadre 4/29/03 (239) 775-5310

CR2E037 (10/02)