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Jan 28 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000000503 (1)

1. Corporation Name

L'AMBIANCE COACH HOMES I ASSOCIATION, INC.

Principal Place of Business

8585 PELICAN BAY BLVD.
NAPLES FL 33963

Mailing Address

2786 W CROWN POINTE
NAPLES FL 34112-5463
US3. Date Incorporated or Qualified
02/01/19953a. Date of Last Report
04/04/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

65-0567717

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROGER KRAMER & ASSOC.
2786 W CROWN POINTE BLVD
NAPLES FL 33963

81 Name

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

83

84 City

FL

85 Zip Code

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

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 SHARPE, KEITH A
NAME 5551 RIDGEWOOD DR., SUITE 203
STREET ADDRESS NAPLES FL 33963
CITY-ST-ZIP1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPTITLE D CREONIA, LEONARD
NAME 18000 SPANISH WELLS DR
STREET ADDRESS NAPLES FL
CITY-ST-ZIP2.1 TITLE P
2.2 NAME KARAS, PETER
2.3 STREET ADDRESS 1800 L'AMBIANCE CIRCLE #202
2.4 CITY-ST-ZIP NAPLES FL 34104TITLE D MCCARTHY, VIRGINIA
NAME 1800 L'AMBIANCE CIRCLE
STREET ADDRESS NAPLES FL
CITY-ST-ZIP3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP4.1 TITLE UB
4.2 NAME Andersen, Jonert
4.3 STREET ADDRESS 2200 L'AMBIANCE CIRCLE #101
4.4 CITY-ST-ZIP NAPLES FL 34104TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 1/6/97 941 793-7771

CR2E037 (9/96)