

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004002

FILED
Jan 18, 2009
Secretary of State

Entity Name: AMBIENCE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O STEVEN R LIGHT
8930 SW 101 ST
MIAMI, FL 33176 US

New Principal Place of Business:

Current Mailing Address:

C/O STEVEN R LIGHT
8930 SW 101 ST
MIAMI, FL 33176 US

New Mailing Address:

FEI Number: 65-0606230

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LIGHT, STEVEN R
8930 SW 101 ST
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HERNANDEZ, JORGE
Address: 10000 SW 89TH CT
City-St-Zip: MIAMI, FL 33176

Title: STD () Delete
Name: LIGHT, STEVEN R
Address: 8930 SW 101 ST
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: ZAYDEN, ROSE M
Address: 8900 SW 101 ST
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: COHEN, ROBIN
Address: 10063 SW 89TH CT
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: SALADRIGAS, CARLOS
Address: 10003 SW 89 COURT
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: HELLENCAMP, JOHANN
Address: 10060 SW 89TH CT
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEVEN LIGHT

TR

01/18/2009

Electronic Signature of Signing Officer or Director

Date