

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N30335

**FILED**  
**Apr 09, 2015**  
**Secretary of State**  
**CC3547758288**

**Entity Name:** THE VILLAS OF AMBERWOOD III CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

12350 SW 132 CT. # 114  
114  
MIAMI, FL 33186

**Current Mailing Address:**

12350 SW 132 CT. # 114  
114  
MIAMI, FL 33186 US

**FEI Number: 65-0101591**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PORNPRINYA, TONY  
10800 BISCAYNE BLVD., SUITE 988  
MIAMI, FL 33161 US

*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

**Officer/Director Detail :**

Title TD  
Name YAVUZ, FILIZ  
Address 12350 SW 132 CT. STE. 114  
City-State-Zip: MIAMI FL 33186

Title PD  
Name BELINSKY, LAURIE  
Address 12350 SW 132 CT. STE. 114  
City-State-Zip: MIAMI FL 33186

Title VPD  
Name ANON, ELIZ  
Address 12350 SW 132 CT. # 114  
City-State-Zip: MIAMI FL 33186

Title D  
Name MILLER, BRUCE  
Address 12350 SW 132 CT. # 114  
City-State-Zip: MIAMI FL 33186

Title S  
Name BUNGER, SUSAN  
Address 12350 SW 132 CT. # 114  
City-State-Zip: MIAMI FL 33186

Title DIRECTOR  
Name MACCARRONE, MIGUEL  
Address 12350 SW 132 COURT  
114  
City-State-Zip: MIAMI FL 33186

*I hereby 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 all other like empowered.*

**SIGNATURE: BELINSKY , LAURIE**

**PRESIDENT**

**04/09/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date