

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 29, 2007 8:00 am
Secretary of State

03-29-2007 90031 030 ****61.25



DOCUMENT # 738909
 1. Entity Name
ASHLEIGH HOUSE HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business Mailing Address
 3113 S OCEAN DR 3113 S OCEAN DR
 HALLANDALE BEACH FL 33009 HALLANDALE BEACH FL 33009

2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State

Zip Country Zip Country

4. FEI Number **NO-T APPLICABLE** Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required



1st MOORE CR2E037 (10/06)

6. Name and Address of Current Registered Agent
NEEDLEMAN, LENNY
 3113 S OCEAN DR
 HALLANDALE BEACH FL 33009

7. Name and Address of New Registered Agent
 Name **VIRGINIA KUCK**
 Street Address (P.O. Box Number is Not Acceptable) **3113 SOUTH OCEAN DRIVE**
HALLANDALE BEACH
 City **FL** Zip Code **33009**

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 **Virginia Kuck - ASST. Secretary + Virginia Kuck** DATE **3-19-07**
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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 NAME STREET ADDRESS CITY-ST-ZIP	DT KUCK, VIRGINIA 3113 S OCEAN DRIVE HALLANDALE FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BORNSTEIN, RALPH 3113 S. DESAN DRIVE HALLANDALE FL 33009 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WISNIEWSKI, BERNICE 3113 S. OCEAN DRIVE HALLANDALE FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. P. BROOKS, HENRY 3113 S OCEAN DR HALLANDALE FL 33009 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MARLENE, GARCIA 3113 S OCEAN DR HALLANDALE FL 33009 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NEEDLEMAN, LENNY 3113 S OCEAN DR HALLANDALE FL 33009 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS VIRGINIA KUCK <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3113 South Ocean Drive Hallandale Beach, FLA 33009
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER NORMAN FAHNT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3113 South Ocean Drive Hallandale Beach, FLA 33009

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: **Virginia Kuck** SECRETARY **3-21-07** 954-454-3113
Signature and typed or printed name of signing officer or director Date Daytime Phone #