UNIFORM BUSINESS REPORT (UBR) Homeowners Assac 00 MAY 25 AM 11: 30 Principal Place of Business Mailing Address Custom Property Mgmt. Custom Property Mgmt. 2328 S. Congress Ave. 2328 S. Congress Avenue SECRETARY OF STATE TALLAHASSEE, FLORIDA suite 2-A suite 2-A West Palm Beach, FL 33406 West Palm Bch, FL 33406 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Applied For 59-2254277 Not Applicable Zip Ζip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Custom Property Management Inc Street Acdress (P.O. Box Number is Not Acceptable) 2328 South Congress Avenue suite 2-A City West Palm Beach, 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. SIGNATURE -9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. PRESIDENTI TITLE Change ☐ Addition TITLE Delete A.MOTT MICHELE NAME 4339 ROYAL BANYAN WAY #A STREET ADDRESS STREET ADDRESS LAKEWORTH. CITY-ST-ZIP CITY-ST-ZIP Delete TITI F BETTY-GENE CUSHMAN NAME NAME 4322 ROYAL BANYAN WAY TO STREET ADDRESS STREET ADDRESS .W-FL 33461 CITY-ST-7iP CITY-ST-ZIP Addition PIAZ Change RIGUCIA SEC TITLE 4306 ROYAL BANYAN WY #B NAME 706/01/700--01076 STREET ADDRESS STREET ADDRESS LW. FL 33461 ****B1.25 *****61.25 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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: MICHAEL MINING OFFICER OR DIRECTOR

Date Daytime Phone #

2062

ASHLEY VILLAS HOMEOWNERS ASSOC. 2328 South Congress Avenue, Suite 2-A West Palm Beach, Florida 33406 (561) 439-1433

May 19, 2000

Florida Department of State
Division of Corporations
Leslie Sellers/Document Specialist
Post Office Box 6327
Tallahassee, Florida 32314

Dear Ms. Sellers:

In fact, we did not receive a reject letter for our 1999 Annual Report. If there is any thing else we need to do in order to finalize this matter, please contact me at your earliest convenience.

I have also enclosed a copy of our canceled check for 1999.

Thank you for your time.

Sincerely yours,
while Marchman

Jennifer Marchman

bookkeeper