

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 03, 2004
Secretary of State**

DOCUMENT# N01237

Entity Name: ASCOT HEATH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

BERNADENE "BERNIE" GROOM
4519 NW 79TH TERRACE
OCALA, FL 34482 US

New Principal Place of Business:

BERNADENE
4519 NW 79TH TERRACE
OCALA, FL 34482 US

Current Mailing Address:

BERNADENE "BERNIE" GROOM
4519 NW 79TH TERRACE
OCALA, FL 34482 US

New Mailing Address:

BERNADENE
4519 NW 79TH TERRACE
OCALA, FL 34482 US

FEI Number: 59-2629934 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GROOM, BERNADENE "BER"
4519 NW 70TH TERRACE
OCALA, FL 34482 US

Name and Address of New Registered Agent:

GROOM, BERNADENE
4519 NW 70TH TERRACE
OCALA, FL 34482 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: BERNADENE GROOM 02/03/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, CHARLES P
Address: 4401 N.W. 79 TER. RD.
City-St-Zip: Ocala, FL 34482

Title: D () Delete
Name: MEADOWS, BETTY
Address: 4411 N.W. 79 TER. RD.
City-St-Zip: Ocala, FL 34482

Title: D () Delete
Name: MEMMOLI, CYNTHIA
Address: 4517 NW 79 TERRACE ROAD
City-St-Zip: Ocala, FL 34482

Title: STD () Delete
Name: GROOM, BERNADENE
Address: 4519 NW 79TH TERRACE
City-St-Zip: Ocala, FL

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
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BERNADENE GROOM STD 02/03/2004
Electronic Signature of Signing Officer or Director Date