2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000002052

Entity Name: THE ASHEVILLE CONDOMINIUM ASSOCIATION, INC.

FILED Apr 24, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3046 VIRGINIA ST 3048 VIRGINIA ST

COCONUT GROVE, FL 33133 COCONUT GROVE, FL 33133

Current Mailing Address: New Mailing Address:

3046 VIRGINIA ST 3048 VIRGINIA ST

COCONUT GROVE, FL 33133 COCONUT GROVE, FL 33133

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

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

DE LA CRUZ, LUIS F JR
95 MERRICK WAY STE 440
KINTZING, WILLIAM F
3048 VIRGINIA STREET

CORAL GABLES, FL 33134 US COCONUT GROVE, FL 33133 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: WILLIAM F. KINTZING 04/24/2003

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: KINTZING, WILLIAM F KINTZING, WILLIAM F

 Name:
 KINTZING, WILLIAM F
 Name:
 KINTZING, WILLIAM F

 Address:
 3046 VIRGINIA ST
 Address:
 3048VIRGINIA ST

City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip: COCONUT GROVE, FL 33133

Title: F () Delete Title: D (X) Change () Addition Name: NEOL, BONNITA F Name: NOEL, BONNITA F

 Address:
 3046 VIRGINIA ST
 Address:
 3048 VIRGINIA ST

 City-St-Zip:
 COCONUT GROVE, FL 33133
 City-St-Zip:
 COCONUT GROVE, FL 33133

Title: D () Delete Title: D (X) Change () Addition

Name: BROWNE, SÀLLY Name: BROWNE, SÀLLY
Address: 3046 VIRGINIA ST Address: 3048 VIRGINIA ST

City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip: COCONUT GROVE, FL 33133

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: WILLIAM F. KINTZING D 04/24/2003