

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005210

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: ASHI FLORIDA WIREGRASS INC

**Current Principal Place of Business:**

7024 PALMETTO PINES LN  
LAND O'LAKES, FL 34637

**New Principal Place of Business:**

**Current Mailing Address:**

7024 PALMETTO PINES LN  
LAND O'LAKES, FL 34637

**New Mailing Address:**

FEI Number: 26-2703492      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RINICKER, TOMMY L  
7024 PALMETTO PINES LANE  
LAND O'LAKES, FL 34637      US

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

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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: RINICKER, TOMMY L  
Address: 7024 PALMETTO PINES L  
City-St-Zip: LAND O'LAKES, FL 34637

Title: VP ( ) Delete  
Name: WHELEN, DENNIS  
Address: 22440 LAURELDALE DR  
City-St-Zip: LUTZ, FL 33549

Title: T ( ) Delete  
Name: JANOSZ, NANCY R  
Address: 1105 CONCH COURT  
City-St-Zip: WESLEY CHAPEL, FL 33544

**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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: TOMMY L RINICKER

PRES

04/08/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date