

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 738909

**FILED**  
**Feb 27, 2017**  
**Secretary of State**  
**CC7709465666**

**Entity Name:** ASHLEIGH HOUSE HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

3113 S OCEAN DR  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

3113 S OCEAN DR  
HALLANDALE BEACH, FL 33009

**FEI Number:** 59-1878640

**Certificate of Status Desired:** No

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

KUCK, VIRGINIA  
3113 S OCEAN DR  
HALLANDALE BEACH, FL 33009 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRES  
Name            BROOKS, HENRY  
Address        3113 S OCEAN DRIVE  
City-State-Zip: HALLANDALE FL 33009

Title            VP, 1ST  
Name            GARCIA, MARLENE  
Address        3113 S OCEAN DR  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            SECT  
Name            BAER, RON  
Address        3113 S OCEAN DR  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            TREASURER  
Name            KUCK, VIRGINIA  
Address        3113 S OCEAN DR  
City-State-Zip: HALLANDALE FL 33009

Title            VP, 2ND  
Name            BORNSTEIN, RALPH  
Address        3113 S OCEAN DR  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            ASST. SECRETARY  
Name            ROSENBLUM, HARRIET  
Address        3113 S OCEAN DR  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            DIRECTOR  
Name            FRIEDMAN, AL  
Address        3113 S. OCEAN DRIVE  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            DIRECTOR  
Name            NEEDLEMAN, IR1NA  
Address        3113 S OCEAN DR  
City-State-Zip: HALLANDALE BEACH FL 33009

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE:** VIRGINIA KUCK

**TREASURER**

**02/27/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title ASST. TREASURER  
Name ZITZER, FAINA  
Address 3113 S OCEAN DR  
City-State-Zip: HALLANDALE BEACH FL 33009