

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03724

**FILED**  
**Feb 16, 2015**  
**Secretary of State**  
**CC7915651673**

**Entity Name:** ASHLAND E CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

FIRSTSERVICE RESIDENTIAL  
6300 PARK OF COMMERCE BLVD.  
BOCA RATON, FL 33487-8290

**Current Mailing Address:**

FIRSTSERVICE RESIDENTIAL  
6300 PARK OF COMMERCE BLVD.  
BOCA RATON, FL 33487-8290 US

**FEI Number:** 59-2425595

**Certificate of Status Desired:** No

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

WASSERSTEIN, P.A.  
6501 CONGRESS AVENUE, SUITE 100  
BOCA RATON, FL 33487 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:** PATRICIA HARTLEY

02/16/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name BRUDKA, HARRY  
Address 15090 ASHLAND PL #182  
City-State-Zip: DELRAY BEACH FL 33484

Title PRESIDENT  
Name KANZER, LARRY  
Address 15090 ASHLAND PLACE #150  
City-State-Zip: DELRAY BCH FL 33484

Title TD  
Name LEVY, GLORIA  
Address 15090 ASHLAND PL #163  
City-State-Zip: DELRAY BEACH FL 33484

Title VP, SECRETARY  
Name JUHLMANN, ALLEN  
Address 15090 ASHLAND PL #183  
City-State-Zip: DELRAY BCH FL 33484

Title DIRECTOR  
Name SILBERSTEIN, BEATRICE  
Address 15090 ASHLAND PL #152  
City-State-Zip: DELRAY BEACH FL 33484

*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:** LARRY KANZER

PRESIDENT

02/16/2015

Electronic Signature of Signing Officer/Director Detail

Date