

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N37892

**FILED  
Mar 01, 2016  
Secretary of State  
CC6721263369**

**Entity Name:** CLARION OAKS HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

CLARION OAKS HOA  
1073 WILLA SPRINGS DR, SUITE 2001  
WINTER SPRINGS, FL 32708

**Current Mailing Address:**

ASC PROPERTY SERVICES INC.  
1073 WILLA SPRINGS DR, SUITE 2001  
WINTER SPRINGS, FL 32708 US

**FEI Number: 59-3009041**

**Certificate of Status Desired: No**

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

ASC PROPERTY SERVICES INC.  
1073 WILLA SPRING DR, SUITE 2001  
WINTER SPRINGS, FL 32708 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 P  
Name STRIBLING, PATTI  
Address 5244 CLARION HAMMOCK DR  
City-State-Zip: ORLANDO FL 32808

Title D  
Name ARMSTRONG, MIKE  
Address 5101 CLARION HAMMOCK DR.  
City-State-Zip: ORLANDO FL 32808

Title DIRECTOR  
Name RIORDAN, PAUL  
Address 5149 CLARION OAKS DR  
City-State-Zip: ORLANDO FL 32808

Title DIRECTOR  
Name BEY, BARBARA  
Address 5112 CLARION HAMMOCK DR.  
City-State-Zip: ORLANDO FL 32808

*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: PAUL RIORDAN**

**DIRECTOR**

**03/01/2016**

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

\_\_\_\_\_  
Date