

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morham
Secretary of State

1996 3-29-96

B-2881

DIVISION OF CORPORATIONS

C

DOCUMENT # 723618 (5)

1. Corporation Name

ASHLEY ARMS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

4111 NE 21ST WAY
LIGHTHOUSE POINT FL 33064

4111 NE 21ST WAY
LIGHTHOUSE POINT FL 33064



3. Date Incorporated or Qualified

06/08/1972

3a. Date of Last Report

02/13/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TENNYSON, RODNEY ATTORNEY
1801 AUSTRALIAN AVE., S. #101
WEST PALM BCH FL 33409

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VP
NAME LORANGER, DONALD
STREET ADDRESS 4111 BE 21ST WAY #93
CITY-ST-ZIP LIGHTHOUSE POINT FL

☒ DELETE

TITLE P
NAME STUDENSKI, LINDA
STREET ADDRESS 4111 NE 21ST WAY, #108-C
CITY-ST-ZIP LIGHTHOUSE POINT FL

☐ DELETE

TITLE D
NAME MULVEY, TED
STREET ADDRESS 4111 NE 21ST WAY, #110-C
CITY-ST-ZIP LIGHTHOUSE POINT FL

☐ DELETE

TITLE D
NAME DIKKENTMANN, JACOBA
STREET ADDRESS 4111 NE 21ST WAY
CITY-ST-ZIP LIGHTHOUSE POINT FL

☐ DELETE

TITLE D
NAME CARLIN, MARY
STREET ADDRESS 4111 NE 21ST WAY, #108-C
CITY-ST-ZIP LIGHTHOUSE POINT FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME Linda Studenski
1.3 STREET ADDRESS 4111 NE 21 WAY 108C
1.4 CITY-ST-ZIP LHP 71

☐ Addition

2.1 TITLE VP
2.2 NAME DANIEL PEREDINIA
2.3 STREET ADDRESS 2110 NE 42 ST
2.4 CITY-ST-ZIP LHP 71

☐ Change ☐ Addition

3.1 TITLE D
3.2 NAME MULVEY Ted
3.3 STREET ADDRESS 4111 NE 21 WAY 110C
3.4 CITY-ST-ZIP LHP 71

☐ Change ☐ Addition

4.1 TITLE D
4.2 NAME DIKKENTMANN JACOBA
4.3 STREET ADDRESS 4111 NE 21 WAY 108C
4.4 CITY-ST-ZIP LHP 71

☐ Change ☐ Addition

5.1 TITLE D
5.2 NAME CONSTANCE BAUMAN
5.3 STREET ADDRESS 2120 NE 42ND ST SA
5.4 CITY-ST-ZIP LHP 71

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Linda Studenski
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-26-96

Date

Daytime Phone #

CR2E037 (12/95)