

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 23, 2007 8:00 am
Secretary of State

01-23-2007 90043 001 ****61.25



DOCUMENT # 723618

1. Entity Name

ASHLEY ARMS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

4111 NE 21ST WAY
LIGHTHOUSE POINT FL 33064

Mailing Address

4111 NE 21ST WAY
LIGHTHOUSE POINT FL 33064



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE CR2E037 (10/06)

City & State

City & State

4. FEI Number

59-1408618

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EMERY, MICHAEL R
ONE FINANCIAL PLAZA
SUITE 2020
FORT LAUDERDALE FL 33394

7. Name and Address of New Registered Agent

Name

Emery, Michael

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

888 So Andrews Ave # 201

City

FT Lauderdale

FL

Zip Code

33316

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when registering)

DATE _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY ST ZIP	<input type="checkbox"/> Delete
PD	STUDENSKI, LINDA	4111 NE 21 WAY 106C	LIGHTHOUSE POINT FL 33064	<input type="checkbox"/>
VPD	WOODS, ELLIOTT	4111 NE 21 WAY 201C	LIGHTHOUSE POINT FL 33064	<input checked="" type="checkbox"/>
T	FABBRI, MARCELLA	2110 NE 42 ST 1B	LIGHTHOUSE POINT FL 33064	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY ST ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	Michael Tempesta - VPD	4111 NE 21 WAY 210C	Lighthouse Point 33064	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Linda Studenski* LINDA STUDENSKI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-07 954 946-9331

Date

Daytime Phone #