2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# 770907

Entity Name: ASHMONT NEIGHBORHOOD ASSOCIATION INC

Current Principal Place of Business:

MWI-BROWARD, INC.
4373 ROCK ISLAND RD
LAUDERHILL, FL 33319 US

New Principal Place of Business:

Current Mailing Address:

MWI-BROWARD, INC.
4373 ROCK ISLAND RD
LAUDERHILL, FL 33319 US

New Mailing Address:

FEI Number: 59-2391462 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRITTENBERGER, KELLY
4373 ROCK ISLAND RD
LAUDERHILL, FL 33319 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title:	T	( ) Delete
Name:	ROBINSON, MARILYN	
Address:	7747 ASHMONT CIRCLE	
City-St-Zip:	TAMARAC, FL 33321	
Title:	S	( ) Delete
Name:	NOSTRA, CHARLES	
Address:	7352 ASHMONT CIRCLE	
City-St-Zip:	TAMARAC, FL 33321	
Title:	V	( ) Delete
Name:	ARNOLD, BOROK	
Address:	7241 ASHMONT CIRCLE	
City-St-Zip:	TAMARAC, FL 33321	
Title:	P	( ) Delete
Name:	CONRAD, FISCHLER	
Address:	7857 ASHMONT CIRCLE	
City-St-Zip:	TAMARAC, FL 33321	
Title:	D	( ) Delete
Name:	LOEFFLER, ARTHUR	
Address:	7436 ASHMONT CIRCLE	
City-St-Zip:	TAMARAC, FL 33321	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KELLY CRITTENBERGER AGT 03/27/2009

Electronic Signature of Signing Officer or Director — Date