Daytime Phone #

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND

FILED Apr 20, 2001 8:00 am Secretary of State DOCÚMENT # F0000006203 1. Entity Name ASTON ACQUISITION, INC. 04-20-2001 90159 016 ***150.00 Principal Place of Business Mailing Address 137 SOUTH PEBBLE BEACH BLVD., STE. 201 137 SOUTH PEBBLE BEACH BLVD., STE, 201 SUN CITY CENTER FL 33573 SUN CITY CENTER FL 33573 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. --- Suite, Apt. #, etc. --City & State City & State 4. FEI Number Applied For 65-0733337 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HUTCHINSON, RICHARD Street Address (P.O. Box Number is Not Acceptable) 137 SOUTH PEBBLE BEACH BLVD., STE. 201 SUN CITY CENTER FL 33573 City Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees -(See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. **PCEO** □ Delete Change ☐ Addition TITLE TITLE MEYERS, RONALD NAME NAME MYERS 137 SOUTH PEBBLE BEACH BLVD., STE. 201 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SUN CITY CENTER FL 33573 ☐ Delete TITLE ☐ Change ☐ Addition NAME HUTCHINSON, RICHARD NAME STREET ADDRESS 137 SOUTH PEBBLE BEACH BLVD., STE. 201 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SUN CITY CENTER FL 33573 TITLE ☐ Delete TITLE M Addition ☐ Change NAME HOFFMAN, MATTHEW NAME STREET ADDRESS STREET ADDRESS 137 SOUTH PEBBLE BEACH BLVD., STE. 201 CITY-ST-ZIP CITY-ST-7IP SUN CITY CENTER FL 33573 VAST X Delete TITLE TITLE Change ☐ Addition DON NORTON NAME BOBBIT, JACALYN NAME STREET ADDRESS 137_SOUTH, PEBBLE BEACH, BLVD., STE. 201. STREET ADDRESS SAME CITY-ST-ZIP CITY-ST-ZIP SUN CITY CENTER FL 33573 CD ☐ Delete TITLE Change ☐ Addition NAME HOFFMAN, ALFRED JR. NAME STREET ADDRESS STREET ADDRESS 137 SOUTH PEBBLE BEACH BLVD., STE. 201 CITY-ST-ZIP CITY-ST-ZIP SUN CITY CENTER FL 33573 D TITLE ☐ Delete Change ☐ Addition NAME AKERMAN, DON E NAME STREET ADDRESS 137 SOUTH PEBBLE BEACH BLVD., STE. 201 STREET ADDRESS CITY-ST-ZIP SUN CITY CENTER FL 33573 13. I hereby certify that the information supplied with the filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is frue and adjurate 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 impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an ad