

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007286

FILED
Apr 28, 2008
Secretary of State

Entity Name: ASHTON OAKS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 5425
LAKELAND, FL 338075425

New Principal Place of Business:

925 ASHTON OAKS CIRCLE
LAKELAND, FL 33813

Current Mailing Address:

PO BOX 5425
LAKELAND, FL 338075425

New Mailing Address:

FEI Number: 80-0026695

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROYAL, JENNIFER E
950 ASHTON OAKS CIR
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

LEHMAN, TORI S
925 ASHTON OAKS CIR
LAKELAND, FL 33813 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: TORI S. LEHMAN

04/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD (X) Delete
Name: WIMBERLY, DOUG
Address: 962 ASHTON OAKS CIRCLE
City-St-Zip: LAKELAND, FL 33813

Title: PD () Delete
Name: ELSON, JEFF
Address: 844 ASHTON OAKS CIRCLE
City-St-Zip: LAKELAND, FL 33813

Title: VD () Delete
Name: ROYAL, DWIGHT
Address: 950 ASHTON OAKS CIR
City-St-Zip: LAKELAND, FL 33813

Title: TSD () Delete
Name: LEHMAN, TORI
Address: 925 ASHTON OAKS CIR
City-St-Zip: LAKELAND, FL 33813

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: TSD (X) Change () Addition
Name: LEHMAN, TORI S
Address: 925 ASHTON OAKS CIR
City-St-Zip: LAKELAND, FL 33813

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: TORI S LEHMAN

TSD

04/28/2008

Electronic Signature of Signing Officer or Director

Date