FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

	1998	DIVISION OF C	ORPORATIONS	Secreta	ry of State
DOCU 1. Corporal	JMENT # NO11:	33 (0)			
ASHT	ON LAKES NO. 1 CONDO	MINIUM ASSOCIATION. II	NC.		
				. I (BERILIE) DIX BEREL ILIERI ALBON HARD III	I BIRAL BIRAL BIRAL BIRAL BIRAL BIRAL BIRAL
Principal Pla	ace of Business	Malling Address			
·		<u>-</u>	•		·
2951 CLARK ROAD SARASOTA FL 34231		2951 CLARK ROAD SARASOTA FL 34231		3. Date Incorporated or Qualified	
				01/27/1984 4. FEI Number	Applied For
				65-0108575	Not Applicable
2. Principal Place of Business		2a. Malling Address			\$8.75 Additional
Suite, Ap	t. #. etc.	Suite, Apt. #, etc.			Fee Required
22		27		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & Sta	ate	City & State		7. Is this nonprofit corporation a hom	eowners association?
23 Zip	Country	Zip	Country	X	
24	25	⊢ ⊣ ' ⊢	30	This corporation owes or has paid Personal Property Tax due June 36	
	9. Name and Address of Curre			10. Name and Address of New Regi	
			81 Name		
	rts Laura		82 Street Ac	ONSALL, JOE E. Idress (P.O. Box Number is Not Acceptable)
	CLARK RD		2	951 Clark ROad	
	\$-1111		83		
SAHAS	OTA FL 34231		84 City		85 Zip Code
11. Pursuan	t to the provisions of Sections 617.05	502 and 617.1508. Florida Statutes	s the above-pamed co	arasota	FL 34231
office or	registered agent, or both, in the Stat	te of Florida. Such change was at	thorized by the corporate	orporation submits this statement for the pur ration's board of directors. I hereby accept to	the appointment as registered
			كررميلا		4-98
	Joe F. Bonsall, Signature, typed or printed name of registered a		Registered Agent signature rec		DATE
TITLE	OFFICERS AI	ND DIRECTORS DELETE	13. 0	ADDITIONS/CHANGES TO OFFICER	
NAME	COSENTINO, RAY		1.1 TITLE 1.2 NAME	PD	Change
STREET ADDRESS			1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	21.701.6	VD	Change Addition
NAME	HORNEMAN, THORNTON		2.2 NAME	ν	•
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		2. 4 CITY-ST-ZIP		
TITLE	STD CHARLES	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME STREET APPROVA	BREW, CHARLES 5693 ASHTON LAKES DR.		3.2 NAME		
STREET ADDRESS CITY-ST-ZIP	SARASOTA FL		3.3 STREET ADDRESS		
TITLE	ASTD	☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME	DUANE MARTIN		4. 2 NAME		
STREET ADDRESS	5641 ASHTON LK DR		4.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP	- W-944	Change Flagger
TITLE NAME		רו מניננונ	6.1 TITLE		Change Addition
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
THE PROPERTY.					
CITY-ST-ZIP			6.4 CITY-ST-ZIP	•	

14. I hereby certify that the information supplied with this 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 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.

FILED

Mar 27 1998 8:00am