2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # N01133



FILED Mar 09, 2006 8:00 am Secretary of State

ASHTON INC.		NO. 1 CONDOM	INIUM AS	SSOCIATION,	•			(03-09-2006	90155 031	****61.25	i	
2951 CLARK ROAD 295			g Address 1 CLARK ROAD ASOTA, FL 34231	· · · · · · · · · · · · · · · · · · ·	•								
2. Principal P	Place of Busin	ness	3. Mai	ling Address	-	•	···						
Suite, Apt. #, etc. Su			Suite, Apt. #, etc.				03012006	Chg-NP	CR2E	037 (11/05)			
City & State C			Ci	ity & State				4. FEI Number 65-0108575				Applied For Not Applicable	
Zip Country Zi			· ·				5. Certificate of Status Desired See Required Fee Required						
	6. Name	and Address of Curre	nt Registere	ed Agent		Name		7. Name and	Address of Ne	w Registered	Agent		
JOSEPH, I 2951 CLAF SARASOT	RK RD	231					Address (F	P.O. Box Numbe	r is Not Accept	able)			
		•.,		City						F	Zip Cod	le	
	named entit tions of regist	y submits this statementered agent. g g g g g g g g g g g g g	t for the purp	oose of changing its	registere	ed office o	r register	ed agent, or bot	h, in the State o			and accept	
SIGNATURE .													
	Signature, typed	or printed name of registered ag	ent and title if app	olicable. (NOT	E: Registere	d Agent signat	ture required	when reinstating)		DATE			
	Filing Fe	e is \$61.25 May 1, 2006	ent and title if ap	9. Election Can Trust Fund C	npaign F	inancing		\$5.00 May B Added to Fees	e F	Make che	ck payable t		
10.	Filing Fe	e is \$61.25		9. Election Can Trust Fund C	npaign F	inancing		\$5.00 May B	F	Make che lorida Depa	ck payable t artment of S	tate	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STICH, RI	e is \$61.25 May 1, 2006 OFFICERS AND ICHARD NES CT		9. Election Can Trust Fund C	TITLE NAMES TREE	inancing ion.		\$5.00 May B Added to Fees	F	Make che lorida Depa	ck payable t artment of S	tate	
TITLE NAME STREET ADDRESS	PD STICH, R 7144 WAI SARASO VDTD HORNEM 5695 ASH	e is \$61.25 May 1, 2006 OFFICERS AND		9. Election Can Trust Fund C	mpaign F Contributi 11. TITLE NAMI STRE CITY TITLE NAMI STRE	E E E E ADDRESS -ST-ZIP	VOT	\$5.00 May B Added to Fees ADDITIONS/CH/	ANGES TO OFF	Make che Florida Depa ICERS AND (ck payable tartment of S DIRECTORS IN Change	tate	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

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PUCHARD 5TICH
LE OF SIGNING OFFICER OR DIRECTOR