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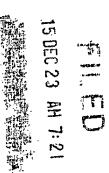
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Lake Ashton Homeowners Association Inc. Name of Corporation
DOCUMENT NUMBER: <u>№0200000 473</u>
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
H. Borden MANC Name of Contact Person
Firm/Company
4141 Ashton Club Drive
LAKe Walts II 33859 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (BL3) 325 0065 Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

-	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this corporation organized under the laws of the State of
in order to change its register	ed office or registered agent, or both, in the State of Florida.
1. The name of the corporation:	LAKE Achton Home owners Association An
2. The principal office address:	4141 Ashton Club DRING
	LAKE Walks F/ 33855
3. The mailing address (if different):	
4. Date of incorporation/qualification:	01/24/2002 Document number: NO 2006000 473
5. The name and street address of the conformal Provide Department of State: (If resignation of State)	urrent registered agent and registered office on file with the gned, enter resigned)
Jun	e Young
4141	Ashton Club Drive
LAKE	Walus 71 33859
(if changed):	ew registered agent (if changed) and /or registered office
4141 f Lake	15hton Club Deive P.O. Box NOT acceptable WAlks 7/ 33857
The street address of its registered offi as changed will be identical.	ce and the street address of the business office of its registered agent,
	tion duly adopted by its board of directors or by an officer so ation has been notified in writing of the change.
Signature of an officer or director	H Bonden Deane Tresident Printed or typed name and title
I hereby accept the appointment as reg I further agree to comply with the prov performance of my duties, and I am far agent. Or if this document is being fil hereby confirm that the corporation ha	ristered agent and agree to act in this capacity. visions of all statutes relative to the proper and complete miliar with and accept the obligation of my position as registered ed merely to reflect a change in the registered office address, I as been notified in writing of this change.
Signature of Registered Agent If signing on behalf of an entity:	

* * * FILING FEE: \$35.00 * * *