

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 06, 2004  
Secretary of State**

DOCUMENT# N02000001163

Entity Name: ASNICK LANE HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

329 RUCKEL DR  
NICEVILLE, FL 32578

**New Principal Place of Business:**

**Current Mailing Address:**

329 RUCKEL DR  
NICEVILLE, FL 32578

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DUNBAR, DOUGLAS  
329 RUCKEL DR  
NICEVILLE, FL 32578

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: DUNBAR, DOUGLAS  
Address: 329 RUCKEL DR  
City-St-Zip: NICEVILLE, FL 32578

Title: DV ( ) Delete  
Name: DUNBAR, ROBERT  
Address: 717 MCDERMOTT AVE  
City-St-Zip: MELBOURNE, FL 32935

Title: DST ( ) Delete  
Name: DUNBAR, ANDREA  
Address: 329 RUCKEL DR  
City-St-Zip: NICEVILLE, FL 32578

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DOUGLAS DUNBAR

DP

01/06/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date