2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000333

FILED May 30, 2006 Secretary of State

Entity Name: ASHLEY POINTE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3020 S FLORIDA AVE STE 101 8010 ASHLEY POINTE DRIVE

LAKELAND, FL 33803 LAKELAND, FL 33810

Current Mailing Address: New Mailing Address:

3020 S FLORIDA AVE STE 101 8010 ASHLEY POINTE DRIVE

LAKELAND, FL 33803 LAKELAND, FL 33810

FEI Number: 51-0445560 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ADAMS, ROBERT J ROTHENBERG, ROBERT 3020 S FLORIDA AVE STE 101 8010 ASHLEY POINTE DRIVE LAKELAND, FL 33803 US LAKELAND, FL 33810 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: ROBERT ROTHENBERG 05/30/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 $\label{eq:fitte:pd} \mbox{Fitte:} \qquad \mbox{PD} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{MR} \qquad \mbox{(X) Change () Addition}$

 Name:
 ADAMS, D. JOEL
 Name:
 ROTHENBERG, ROBERT

 Address:
 3020 S FLORIDA AVE STE 101
 Address:
 8010 ASHLEY POINTE DR

 City-St-Zip:
 LAKELAND, FL 33803
 City-St-Zip:
 LAKELAND, FL 33810

Title: VD (X) Delete Title: () Change () Addition

 Name:
 ADAMS, ROBERT J
 Name:

 Address:
 3020 S FLORIDA AVE STE 101
 Address:

 City-St-Zip:
 LAKELAND, FL 33803
 City-St-Zip:

Title: STD (X) Delete Title: () Change () Addition

 Name:
 WALSH, BRIAN
 Name:

 Address:
 3020 S FLORIDA AVE STE 101
 Address:

 City-St-Zip:
 LAKELAND, FL 33803
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT ROTHENBERG MR 05/30/2006