

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2007 8:00 am
Secretary of State

03-30-2007 90131 011 ****61.25

DOCUMENT # N03000003868

1. Entity Name
ANSLEY PARK HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**C/O VISTA PROPERTIES
100 VISTA ROYALE BLVD.
VERO BEACH, FL 32962**

Mailing Address
**C/O VISTA PROPERTIES
100 VISTA ROYALE BLVD.
VERO BEACH, FL 32962**

40043410



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02022007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
54-2110603

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MCKINNON, CHARLES W ESQ.
3055 CARDINAL DRIVE
SUITE 302
VERO BEACH, FL 32963**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	MITCHELL, BOB	
STREET ADDRESS	1135 ANSLEY AVE., S.W.	
CITY-ST-ZIP	VERO BEACH, FL 32968	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	CASSIDY, BARBARA	
STREET ADDRESS	1015 ANSLEY AVE., S.W.	
CITY-ST-ZIP	VERO BEACH, FL 32968	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	EDMUNDS, FREDERICK	
STREET ADDRESS	1190 BUCKHEAD DR.	
CITY-ST-ZIP	VERO BEACH, FL 32968	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	KRAFT, HORST	
STREET ADDRESS	1080 BUCKHEAD DR.	
CITY-ST-ZIP	VERO BEACH, FL 32968	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CLAYTON, RICK	
STREET ADDRESS	1210 BUCKHEAD DR.	
CITY-ST-ZIP	VERO BEACH, FL 32968	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jane Nelson	
STREET ADDRESS	1200 BUCKHEAD DR.	
CITY-ST-ZIP	VERO BEACH, FL 32968	
TITLE	Sec Sharland	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2960 Piedmont Place SW	
STREET ADDRESS	VERO BEACH, FL 32968	
CITY-ST-ZIP		
TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bob Flaherty	
STREET ADDRESS	1145 Ansley Ave SW	
CITY-ST-ZIP	VERO BEACH, FL 32968	
TITLE	Treas.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Brian Shambo	
STREET ADDRESS	2915 Peachtree St. SW	
CITY-ST-ZIP	VERO BEACH, FL 32968	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Brad Pfennig	
STREET ADDRESS	1120 BUCKHEAD DR SW	
CITY-ST-ZIP	VERO BEACH, FL 32968	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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.

SIGNATURE:

Jane M. Nelson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/2007

Date

772-299-3726

Daytime Phone #