

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007446

FILED
Mar 22, 2011
Secretary of State

Entity Name: ASHLEY LAKES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5901 US HIGHWAY 19
SUITE 7Q
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

C/O QUALIFIED PROPERTY MGMT INC
5901 US HWY 19, SUITE 7Q
NEW PORT RICHEY, FL 34652

Current Mailing Address:

5901 US HIGHWAY 19
SUITE 7Q
NEW PORT RICHEY, FL 34652

New Mailing Address:

C/O QUALIFIED PROPERTY MGMT INC
5901 US HWY 19, SUITE 7Q
NEW PORT RICHEY, FL 34652

FEI Number: 54-2124693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUALIFIED PROPERTY MANAGEMENT INC
5901 US HIGHWAY 19
SUITE 7Q
NEW PORT RICHEY, FL 34652 US

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: PD
Name: MYERS, DAN
Address: 13843 JACOBSON DRIVE
City-St-Zip: TAMPA, FL 33556

Title: VP
Name: JEANTY, REBECCA
Address: 2126 HARCOURT PLACE
City-St-Zip: TAMPA, FL 33556

Title: SD
Name: FREYMAN, MARION
Address: 2109 HARCOURT PLACE
City-St-Zip: TAMPA, FL 33556

Title: TD
Name: MALIK, TRACI
Address: 13930 JACOBSON DRIVE
City-St-Zip: TAMPA, FL 33556

Title: D
Name: GONZALEZ, JUAN
Address: 2022 HARCOURT PLACE
City-St-Zip: TAMPA, FL 33556

I hereby 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 all other like empowered.

SIGNATURE: DAN MYERS

PD

03/22/2011

Electronic Signature of Signing Officer or Director

Date