## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000002099

Apr 30, 2007 Secretary of State

Entity Name: ASHFORD HARBOUR AT CAPRON RIDGE HOMEOWNERS ASSOCIATION, INC.

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

2060 HWY A1A STE 308 1275 S PATRICK DRIVE

INDIAN HARBOUR BCH, FL 32937 SUITE H

SATELLITE BEACH, FL 32937

**Current Mailing Address:** New Mailing Address:

2060 HWY A1A STE 308 2060 HWY A1A STE 3081275 S PATRICK DRIVE INDIAN HARBOUR BCH, FL 32937

SUITE H

SATELLITE BEACH, FL 32937

FEI Number: 20-2346943 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FLEIS, EDWARD M FLEIS, EDWARD M 2060 HWY A1A STE 308 1275 S PATRICK DRIVE

INDIAN HARBOUR BCH, FL 32937 US SUITE H SATELLITE BEACH, FL 32937 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: EDWARD M FLEIS 04/30/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete FLEIS, EDWARD M FLEIS, EDWARD M Name: Name:

2060 HWY A1A STE 308 Address: 1275 S PATRICK DRIVE STE H Address: City-St-Zip: INDIAN HARBOUR BCH, FL 32937 City-St-Zip: SATELLITE BEACH, FL 32937

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

FLEIS, GERARD J Name: FLEIS, GERARD J Name:

Address: 2060 HWY A1A STE 308 Address: 1275 S PATRICK DRIVE STE H City-St-Zip: INDIAN HARBOUR BCH, FL 32937 City-St-Zip: SATELLITE BEACH, FL 32937

Title: DST () Delete Title: DST (X) Change ( ) Addition CRAWFORD, JANICE E MCDANIEL, MONRIE L Name: Name:

Address: 2060 HWY A1A STE 308 1275 S PATRICK DRIVE STE H Address: City-St-Zip: INDIAN HARBOUR BCH, FL 32937 City-St-Zip: SATELLITE BEACH, FL 32937

I hereby certify that the information supplied with this filing does not qualify 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: EDWARD M FLEIS DP 04/30/2007