

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008404

FILED
Apr 17, 2009
Secretary of State

Entity Name: ASHTON PARK OF OCOEE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1600 WEST COLONIAL DR
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

1600 WEST COLONIAL DR
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 20-3656788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSON, JACK
1600 WEST COLONIAL DRIVE
ORLANDO, FL 32804 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: D () Delete
Name: BOGAN, JERRY
Address: 826 KAZAROS CIRCLE
City-St-Zip: OCOEE, FL 34761

Title: D () Delete
Name: EKENDAHL, NICOLE
Address: 830 KAZAROS CIRCLE
City-St-Zip: OCOEE, FL 34761

Title: D () Delete
Name: WALKER, STACY
Address: 820 KAZAROS CIRCLE
City-St-Zip: OCOEE, FL 34761

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 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: JERRY BOGAN

D

04/17/2009

Electronic Signature of Signing Officer or Director

Date