

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000170

FILED
Apr 30, 2009
Secretary of State

Entity Name: ASHWOOD WEST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

102 PARK PLACE BLVD
SUITE D-2
KISSIMMEE, FL 34741

New Principal Place of Business:

1925 E. EDGEWOOD DRIVE
SUITE 100
LAKELAND, FL 33803

Current Mailing Address:

102 PARK PLACE BLVD
SUITE D-2
KISSIMMEE, FL 34741

New Mailing Address:

PO BOX 2562
LAKELAND, FL 33803

FEI Number: 20-4788471

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDA ASSOCIATION MANAGEMENT, INC.
C/O DOLLIE BOYD
102 PARK PLACE BLVD, STE D-2
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

COMPLETE PROPERTY MANAGEMENT SOLUTIONS
1925 E. EDGEWOOD DRIVE
SUITE 100
LAKELAND, FL 33803 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: LUKE MARKHAM

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LADERER, EDWARD H JR.
Address: 1925 EAST EDGEWOOD DRIVE, SUITE 100
City-St-Zip: LAKELAND, FL 33803

Title: D () Delete
Name: REHBERG, JAMES H
Address: 6802 SHIMMERING DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: D (X) Delete
Name: MARKHAM, LUKE
Address: 1925 EAST EDGEWOOD DRIVE, SUITE 100
City-St-Zip: LAKELAND, FL 33803

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: ED LADERER

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date