## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000008219

FILED Mar 16, 2009 Secretary of State

Entity Name: ASHTON OAKS AT RIVER HALL CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:** New Principal Place of Business: 8430 ENTERPRISE CIRCLE, STE 100 501 CATTLEMEN ROAD BRADENTON, FL 342024108 US SUITE #100 SARASOTA, FL 34232 US **Current Mailing Address:** New Mailing Address: 8430 ENTERPRISE CIRCLE, STE 100 501 CATTLEMEN ROAD BRADENTON, FL 342024108 US SUITE #100 SARASOTA, FL 34232 US FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NRAI SERVICES, INC 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition MERRILL, S. TODD MERRILL, S. TODD Name: Name: 8430 ENTERPRISE CIRCLE, STE 100 Address: 501 CATTLEMEN ROAD SUITE #100 Address: City-St-Zip: BRADENTON, FL 342024108 US City-St-Zip: SARASOTA, FL 34232 US Title: () Delete Title: () Change () Addition KEMPTON, JOHN S Name: Name: Address: 8430 ENTERPRISE CIRCLE, STE 100 Address: City-St-Zip: BRADENTON, FL 342024108 US City-St-Zip: Title: () Delete Title: () Change () Addition FICHTER, THOMAS P JR. Name: Name: 8430 ENTERPRISE CIRCLE, STE 100 Address: Address: City-St-Zip: BRADENTON, FL 342024108 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: FOOTE, TERRY L Name: 8430 ENTERPRISE CIRCLE, SUITE 100 Address: Address: City-St-Zip: BRADENTON, FL 342024108 US City-St-Zip: Title: Title: () Delete ( ) Change (X) Addition ERDMANN, JOERN Name: Name: 16570 GOLDENROD LANE #201 Address: Address: City-St-Zip: City-St-Zip: ALVA, FL 33920

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: BEVERLY MALOUIN, LCAM LCAM 03/16/2009