2002 UNIFORM BUSINESS REPORT (UBR)

Feb 14, 2002 8:00 am **DOCUMENT # N08842** Secretary of State 02-14-2002 90097 050 ****61.25 **ASHLEY PARK HOMEOWNERS ASSOCIATION, INC.** Principal Place of Business Mailing Address 22151 SHOREWIND DR 22/51 SHOREWOOD DR **BOCA RATON FL 33428** BOCA RATON FL 33428 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1766577 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent Name and Address of New Registered Agent .Name Street Address (P.O. Box Number is Not Acceptable) VALYO, PAUL 122151 SHOREWIND DRIVE 300A RATON FL 33428 Zip Code 8. 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 DATE Stonature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change Addition TITLE ☐ Delete TITLE NAME MAIDA, VINCENT NAME STREET ADDRESS 22561 BLUE FIN TR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** TD Change ☐ Addition Delete TITI F TITLE HORTON, MARY NAME NAME STREET ADDRESS STREET ADDRESS 22556 SEA BASS DR CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** VD -☐ Change ☐ Addition TITLE Delete TITLE TIBOR-KONCZ NAME NAME STREET ADDRESS STREET ADDRESS 22352 SEA BASS DR CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** 50 Delete **Change** TITLE ■ Addition TITLE Michael Valinti 22496 Swordfish M. FAU. PAMELA NAME STREET ADDRESS 22552 SWORD FISH DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** Change ☐ Addition TITLE 💢 Delete mary Smith JAROSZ, TERRY NAME NAME 22538 Sea Bass M. STREET ADDRESS 22397 SWORD FISH DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** Baton, 12 33428 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

| Signature And Types of Paymen Male of Signing Officer or Director

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