

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12989

FILED  
Jan 24, 2009  
Secretary of State

**Entity Name:** ASHLEY MANOR ASSOCIATION OF OWNERS, INC.

**Current Principal Place of Business:**

575 LAKE ASHLEY CIR.  
WEST MELBOURNE, FL 32904

**New Principal Place of Business:**

**Current Mailing Address:**

575 LAKE ASHLEY CIR.  
WEST MELBOURNE, FL 32904

**New Mailing Address:**

542 LAKE ASHLEY CIRCLE  
WEST MELBOURNE, FL 32904

**FEI Number:** 59-2785240

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BENTLEY, PAT  
542 LAKE ASHLEY CIRCLE  
W MELBOURNE, FL 32904 US

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

BENTLEY, PAT  
542 LAKE ASHLEY CIRCLE  
WEST MELBOURNE, FL 32904 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: \_\_\_\_\_

01/24/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HAZLETT, MICHAEL  
Address: 544 LAKE ASHLEY CIR  
City-St-Zip: W. MELBOURNE, FL 32904 US

Title: S ( ) Delete  
Name: GASH, LINDA  
Address: 567 LAKE ASHLEY CIRCLE  
City-St-Zip: W. MELBOURNE, FL 32904 US

Title: T,P ( ) Delete  
Name: BENTLEY, PAT  
Address: 542 LAKE ASHLEY CIRCLE  
City-St-Zip: WEST MELBOURNE, FL 32904 US

Title: D ( ) Delete  
Name: HAMMOCK, SKIP  
Address: 556 LAKE ASHLEY CIRCLE  
City-St-Zip: WEST MELBOURNE, FL 32904 US

**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:

Title: D (X) Change ( ) Addition  
Name: FAULCONER, JIM  
Address: 585 LAKE ASHLEY CIRCLE  
City-St-Zip: WEST MELBOURNE, FL 32904 US

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: PAT BENTLEY

P

01/24/2009

Electronic Signature of Signing Officer or Director

Date