2005 COT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED Apr 11, 2005 8:00 am Secretary of State

1. Entity Name ASHTON LAKES NO. 3 CONDOMINIUM ASSOCIATION, INC.								04-11-200	JS 90142 (J20 *****6	01.25	
2951 CLARK ROAD 2951 C				ing Address 51 CLARK ROAD RASOTA, FL 34231				ivanial pa		BIN BIRN BIRN BI	PH 81811 B1811 B18	314Mà BY (1998)
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.					03212005	Chg-NP	CR2E0	37 (10/03)		
City & State			City & State					4. FEI Numbe 65-012				oplied For ot Applicable
Zip Country		Zip	Zip Co		intry	5. Certificate of Status Desired Search Sear						
	6. Name	and Address of Current	Registered	Agent				7. Name and	Address of Nev	v Registered	Agent	
RITCHIE,				2		Name						
2951 CLARK RD SARASOTA, FL 34231						Street Address (P.O. Box Number is Not Acceptable)						
				<i>,</i>		City				FL	Zip Cod	le
• The electric		y submits this statement fo	41 .			L	• .				-	
the obligat	tions of regis	tered agent.			_		. rogioio.	ou agoin, or so				
0.0.0.0.0.0.0	Signature, typed	for printed name of registered agent	and title it appli	cable. (NOTI	E: Registere	d Agent signat	ure required	when reinstating)		DATE		
	Filing Fe	ne is \$61.25	and title if appli	9. Election Car Trust Fund C	npaign F	inancing	ure required	\$5.00 May E Added to Fees	Se F		k payable t	
10.	Filing Fe	e is \$61.25		9. Election Can	npaign F	inancing		\$5.00 May B Added to Fees	F ANGES TO OFFI	Make chec lorida Depa	rtment of S	tate
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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 or 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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR