

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2001 8:00 am
Secretary of State

02-28-2001 90082 040 ****61.25

DOCUMENT # N33083

1. Entity Name

ASHEBOURNE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

P. O. BOX 2552
 ORANGE PARK FL 32067-9552

Mailing Address

P. O. BOX 2552
 ORANGE PARK FL 32067-9552

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2963549

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WISE, DELORES
3684 WATERSIDE DR
ORANGE PARK FL 32065

Name **Linda M. Smith**

Street Address (P.O. Box Number is Not Acceptable)
3804 Waterside Dr.

City **Orange Park,**

FL

Zip Code **32065**

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 **Linda M. Smith**
Linda M. Smith

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-22-01

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV PARIS, CLARK 2653 BELLESHORE CT ORANGE PARK FL 32065	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT TRAYNER, MARY LEE 3781 WATERSIDE DR ORANGE PARK FL 32065	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASDEN, TAMMY 3708 WATERSIDE DR ORANGE PARK FL 32065	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SMITH, LINDA 3804 WATERSIDE DR ORANGE PARK FL 32065	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS THAMES, LAMAR 2697 BELLESHORE CT ORANGE PARK FL 32065	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PARIS, CLARK DP 2653 Belleshore Ct. Orange Park, Fla 32065	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Thames, LAMAR 2697 Belle shore Ct. DV Orange Park, Fl 32065	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Stratton, Michael 3756 Waterside Dr. Orange Park, Fl 32065	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Settle, Cathy 2671 Belleshore Orange Park, Fl 32065	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: **CLARK Paris**
CLARK Paris
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-22-01

Date

215-7610

Daytime Phone #

CR2E037 (10/00)