2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36152

FILED Feb 20, 2004 Secretary of State

Entity Name: ASHTON HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5200 N.W. 43RD STREET., STE 102-217 GAINESVILLE, FL 32606

Current Mailing Address: New Mailing Address:

5200 N.W. 43RD STREET., STE 102-217 GAINESVILLE, FL 32606 US

FEI Number: 59-3015287 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MENET, DAVID E KORNER, JAMES R 5200 N.W. 43RD STREET 703 N.E. 1ST STREET GAINESVILLE, FL 32601 SUITE 102-217 US

GAINESVILLE, FL 32653 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.

Name:

SIGNATURE: JAMES R. KORNER 02/20/2004

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition SPURLIN, SHEILA SMOCK, DAVID Name: Name: 5412 NW 45TH DR Address: **5858 NW 45TH DRIVE** Address: City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: GAINESVILLE, FL 32653

Title: VD Title: (X) Change () Addition () Delete SMOCK, DAVID Name: GEORGE, SNYDER Name:

Address: 5858 NW 45TH DR Address: 5316 NW 46TH TERRACE City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: GAINESVILLE, FL 32653

Title: () Delete Title: SD (X) Change () Addition

KOENER, JAMES BERRY, CHERYL Name: Name: 4435 NW 68TH AVE 4418 NW 58TH AVENUE Address: Address: City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: GAINESVILLE, FL 32653

Title: TD () Delete Title: TD (X) Change () Addition

ALBRECHT, RICHARD Name: Name: KORNER, JAMES 4306 NW 58 PLACE 4435 NW 58TH AVENUE Address: Address: City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: GAINESVILLE, FL 32653

Title: () Delete Title: (X) Change () Addition

TRABAUGFH, MARCUS MOULTHROP, JAMES Name: Name: 4524 NW 53RD LN 4327 NW 58TH AVENUE Address: Address: City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: GAINESVILLE, FL 32653

Title: () Delete Title: () Change (X) Addition

MONAHAN, BILL Name: Address: Address: 5704 NW 45TH DRVIE GAINESVILLE, FL 32653 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES R. KORNER TD 02/20/2004