## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N36152

FILED Aug 22, 2006 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 FEI Number: 59-3015287 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KORNER, JAMES R NEWSOME, MICHAEL S 5200 N.W. 43RD STREET 5200 N.W. 43RD STREET SUITE 102-217 SUITE 102-217 GAINESVILLE, FL 32653 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. SIGNATURE: NEWSOME, MICHAEL S 08/22/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SMOCK, DAVID Name: Name: 5858 NW 45TH DRIVE Address: Address: City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: Title: VD () Delete Title: () Change () Addition GEORGE, SNYDER Name: Name: Address: 5316 NW 46TH TERRACE Address: City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: Title: () Delete Title: () Change () Addition BERRY, CHERYL Name: Name: 4418 NW 58TH AVENUE Address: Address: City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: Title: TD ( ) Delete Title: TD (X) Change ( ) Addition Name: KORNER, JAMES Name: NEWSOME, MICHAEL S 4317 NW 58TH AVENUE Address: 4435 NW 58TH AVENUE Address: City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: GAINESVILLE, FL 32653 Title: () Delete Title: () Change () Addition MOULTHROP, JAMES Name: Name: 4327 NW 58TH AVENUE Address: Address: City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: Title: () Delete Title: () Change () Addition MONAHAN, BILL Name: Name: Address: 5704 NW 45TH DRVIE Address: 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 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: NEWSOME, MICHAEL S TD 08/22/2006