
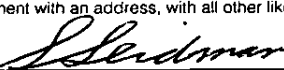


## 02-27-2008 90004 032 \*\*\*61.25

<b>DOCUMENT # N39491</b>						02-27-2008 90004 032 ****61.25	
1. Entity Name <b>ASHFORD AT ABERDEEN ASSOCIATION, INC.</b>							
Principal Place of Business <b>951 BROKEN SOUND PKWY. #250 BOCA RATON, FL 33487</b>			Mailing Address <b>951 BROKEN SOUND PKWY. #250 BOCA RATON, FL 33487</b>				
2. Principal Place of Business - No P.O. Box #			3. Mailing Address				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				
City & State			City & State			01252008 Chg-NP CR2E037 (12/06)	
Zip		Country	Zip		Country	4. FEI Number <b>65-0249723</b> Applied For Not Applicable	
6. Name and Address of Current Registered Agent <b>COMMUNITY ASSOCIATION SERVICES INC. 951 BROKEN SOUND PKWY, SUITE 250 BOCA RATON, FL 33487</b>					7. Name and Address of New Registered Agent Name <b>CAS REALTY LLC</b> Street Address (P.O. Box Number is Not Acceptable) <b>1901 S. CONGRESS AVE STE 480</b> City <b>BOYNTON BEACH</b> FL Zip Code <b>33426</b>		
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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____							
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>			<b>\$5.00 May Be Added to Fees</b>	
						<b>Make check payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		VD ROSENBLUM, SANFORD C/O CAS 951 BROKEN SOUND PKWY #250 BOCA RATON, FL 33483 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TD GINSBURG, TED C/O CAS 951 BROKEN SOUND PKWY #250 BOCA RATON, FL 33437 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		PD PARKER, ROBERT C/O CAS 951 BROKEN SOUND PKWY #250 BOCA RATON, FL 33483 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		SD SEIDMAN, STANLEY 7103 ASHFORD LANE BOYNTON BCH, FL 33437 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		D SEERMAN, JERRY C/O CAS 951 BROKEN SOUND PKWY #250 BOCA RATON, FL 33483 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		D HALPERN, SID C/O CAS 951 BROKEN SOUND PKWY #250 BOCA RATON, FL 33483 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 				Date _____ Daytime Phone # _____			

# ATTACHMENT

40033344  
# N39491

## Ashford at Aberdeen Association, Inc. Board of Directors 2008

Stanley Seidman                      President  
c/o CAS  
1901 S. Congress Av.  
Suite 480  
Boynton Beach, FL 33426

Bob Robinson                      VP  
c/o CAS  
1901 S. Congress Av.  
Suite 480  
Boynton Beach, FL 33426

George Spiro Treasurer  
c/o CAS Realty LLC  
1901 S. Congress Av.  
Suite 480  
Boynton Beach, FL 33426

Irving Breiter Secretary  
c/o CAS Realty LLC  
1901 S. Congress Av.  
Suite 480  
Boynton Beach, FL 33426

Sid Halpern- Director  
c/o CAS Realty LLC  
1901 S. Congress Av.  
Suite 480  
Boynton Beach, FL 33426

Jerry Seerman -Director  
c/o CAS Realty LLC  
1901 S. Congress Av.  
Suite 480  
Boynton Beach, FL 33426

Robert Parker  
c/o CAS Realty LLC  
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