

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 30 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N40888** (2)
1. Corporation Name
ASHTON LAKES NO. 4 CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 2951 CLARK RD SARASOTA FL 34231 US	Mailing Address 2951 CLARK RD SARASOTA FL 34231 US
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3. Date Incorporated or Qualified

11/19/1990

4. FEI Number

65-2036732

Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LYONS, JOHN
1005 MAIN STREET
SUITE 1111
SARASOTA FL 34236**

81 Name

BONSALL, JOE E.

82 Street Address (P.O. Box Number is Not Acceptable)

2951 Clark Road

83

84 City

Sarasota

85 Zip Code

FL 34231

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **Joe E. Bonsall, Manager**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3-24-98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	STD	☐ DELETE
NAME	SUTHERLAND, JUDY	
STREET ADDRESS	5547 ASHTON LAKE DR	
CITY-ST-ZIP	SARASOTA FL	

TITLE	VP	☒ DELETE
NAME	JOHNSON, AL	
STREET ADDRESS	5557 ASHTON LAKE DR	
CITY-ST-ZIP	SARASOTA FL	

TITLE	PD	☐ DELETE
NAME	FABOS, JOHN	
STREET ADDRESS	5541 ASHTON LAKES DR	
CITY-ST-ZIP	SARASOTA FL	

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

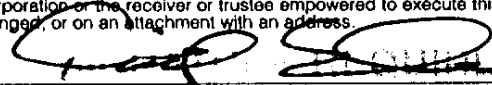
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

VD	☐ Change ☒ Addition
Tim Scanlon	
5567 Ashton Lake Drive	
Sarasota, FL 34231	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **3/20/98 941-922-9603**

CR02037 (10/97)