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CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -8 AM 9:37

DOCUMENT # N47649 (1)

1. Corporation Name
ASHLEY PARK PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3300 S. HIAWASSEE RD. STE. 107 ORLANDO FL 32835-6331	3300 S. HIAWASSEE RD. STE. 107 ORLANDO FL 32835-6331

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/02/1992
3a. Date of Last Report: 01/19/1994
4. FEI Number: 65-0317618 ☐ Applied For ☐ Not Applicable
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. Nonprofit with IRS 501(c)(3) Tax Exempt Status $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.: 22	Suite, Apt. #, etc.: 27
City & State: 23	City & State: 28
Zip: 24 Country: 25	Zip: 29 Country: 30

9. Name and Address of Current Registered Agent

JULIAN, M. DUANE
3300 S. HIAWASSEE RD.
SUITE 104
ORLANDO FL 32835-6331

10. Name and Address of New Registered Agent

81 Name: Julian, M. Duane
82 Street Address (P.O. Box Number is Not Acceptable): 7651 Ashley Park Court
83: Suite 408
84 City: Orlando FL 85 Zip Code: 32835

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: M. Duane Julian — 1/30/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	DP ☒ Change ☐ Addition
NAME	JULIAN, M. DUANE	1.2 NAME	Julian, M. Duane
STREET ADDRESS	3300 S. HIAWASSEE RD. STE 107	1.3 STREET ADDRESS	7651 Ashley Park Court, Suite 408
CITY-ST-ZIP	ORLANDO FL 32835-6331	1.4 CITY-ST-ZIP	Orlando, Florida 32835
TITLE	DST	2.1 TITLE	DST ☒ Change ☐ Addition
NAME	BURNS, MARIAN G.	2.2 NAME	Burns, Marian G.
STREET ADDRESS	3300 S. HIAWASSEE RD. STE. 107	2.3 STREET ADDRESS	7651 Asley Park Court, Suite 408
CITY-ST-ZIP	ORLANDO FL 32835-6331	2.4 CITY-ST-ZIP	Orlando, Florida 32835
TITLE	DVS	3.1 TITLE	DVS ☒ Change ☐ Addition
NAME	JULIAN, DEBRA A.	3.2 NAME	Julian, Debra A.
STREET ADDRESS	330 S. HIAWASSEE RD. STE 107	3.3 STREET ADDRESS	7651 Ashley Park Court, Suite 408
CITY-ST-ZIP	ORLANDO FL 32835-6331	3.4 CITY-ST-ZIP	Orlando, Florida 32835
TITLE	T	4.1 TITLE	T ☒ Change ☐ Addition
NAME	BURNS, MARIAN G	4.2 NAME	Burns, Marian G.
STREET ADDRESS	3300 S. HIAWASSEE RD. STE 107	4.3 STREET ADDRESS	7651 Ashley Park Court, Suite 408
CITY-ST-ZIP	ORLANDO FL 32835-6331	4.4 CITY-ST-ZIP	Orlando, Fla. 32835
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: M. Duane Julian — 1-30-95 — (407) 295-5600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0004411