

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005262

FILED  
Apr 07, 2010  
Secretary of State

**Entity Name:** ASHTON-BRIGHTON HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

7600 ARLINGTON EXPRESSWAY  
JACKSONVILLE, FL 32211 US

**New Principal Place of Business:**

1639 BEACH BLVD.  
JACKSONVILLE BEACH, FL 32250 US

**Current Mailing Address:**

P. O. BOX 50886  
JACKSONVILLE, FL 32211

**New Mailing Address:**

**FEI Number:** 59-3338605

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RIVER CITY MANAGEMENT SERVICES  
7600 ARLINGTON EXPRESSWAY  
JACKSONVILLE, FL 32211 US

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

RIVER CITY MANAGEMENT SERVICES  
1639 BEACH BLVD.  
JACKSONVILLE BEACH, FL 32250 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: STHOMPSON

04/07/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FLAKE, RICHARD  
Address: 1566 WINSTON LANE  
City-St-Zip: FLEMING ISLAND, FL 32003 US

Title: T  
Name: BRUSOE, MARK  
Address: 1541 WINSTON LANE  
City-St-Zip: FLEMING ISLAND, FL 32003

Title: VP  
Name: DRAPER, DON  
Address: 1600 HAMPTON PLACE  
City-St-Zip: FLEMING ISLAND, FL 32003 US

Title: S  
Name: JOHNSON, APRIL  
Address: 1570 WINSTON  
City-St-Zip: FLEMING ISLAND, FL 32003 US

I hereby 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 all other like empowered.

SIGNATURE: STHOMPSON

RA

04/07/2010

Electronic Signature of Signing Officer or Director

Date