2006 NOT-FOR-PROFIT CORPORATION

FILED May 05, 2006 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # N96000004242 ASHLEY PARK FIVE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 7635 ASHLEY PARK CT 1130 E PLANT ST SUITE 503 SUITE H ORLANDO, FL 32835 WINTER GARDEN, FL 34787 04272006 No Cha-NP CR2E037 (4/06) DO NOT WRITE IN THIS SPACE 4. FE! Number Applied For 59-3394771 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LAMAN, GEORGE D DO NOT WRITE 1130-H E PLANT STREET WINTER GARDEN, FL 34787 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Due by May 1, 2006 Added to Fees 10. OFFICERS AND DIRECTORS TITLE VD NAME LAMAN, GEORGE D STREET ADDRESS 1130 E PLANT ST STE H CITY-ST-ZIP WINTER GARDEN, FL 34787 . -U00000564199 05/20/06-80043-017 61.25 TITLE STD NAME LAMAN, EDWARD D STREET ADDRESS 1130 E PLANT ST STE H CITY-ST-ZIP WINTER GARDEN, FL 34787 TITLE NAME LAMAN, JOANNE D STREET ADDRESS 1130 E PLANT ST STE H DO NOT WRITE CITY-ST-ZIP WINTER GARDEN, FL 34787 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not goalify 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 air other like empowered.

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

4/28/06

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