

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 17, 2004 8:00 am Secretary of State 02-17-2004 90008 012 ****61.25

DOCUN 1. Entity Name ASHLEY (
4131 GUNN HIGHWAY 413		4131 GU	illing Address 131 GUNN HIGHWAY MPA, FL 33624			54007189			
2. Principal Place of Business 3. Ma		3. Mailing	Mailing Address						
Suite, Apt. #, etc.		Suite,	Suite, Apt. #, etc.			01192004 _C	hg-NP	CR2E037 (10/03)	
City & State		City &	City & State			4. FEI Number 59-279976	36		pplied For lot Applicable
Zip	Counity	Zip	<u> </u>	Country		5. Certificate of S	latus Desired	S8.75-Ac Fee Requir	Iditional ed
	6. Name and Address of Current I	Registered A	gent			7. Name and Add	iress of New i	Registered Agent	
GREENACRE PROPERTIES, INC 4131 GUNN HWY SUITE 7E TAMPA, FL 33624				Name Street A: Meirose & Friscia, P.A. 500 North Westshore Blvd. Ste 635 City Tampa, FL 33609					
the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE Filling Fee is \$61.25 Due by May 1, 2004 Pull Due by May 1, 2004									
							500000000000000000000000000000000000000		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIF TD FELICETTI, LOUIS 10218 ASHLEY OAKS RIVERVIEW, FL 33569	ECTORS	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ॐ SE ' Sa 74	lisbury, Troy 06 Mint Julep verview, F1 335		ERS AND DIRECTORS I	N 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD THOMAS, MICHAEL 10212 ASHLEY OAKS DR RIVERVIEW, FL 33569		☐ Delete	TITLE - NAME STREET ADDRESS CITY-ST-ZIP	D Curt 1033	iis, Jesse 32 Ashley Oaks D rview, FL 33569	rive	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AMOS, KEVIN 7408 MINT JULEP RIVERVIEW, FL		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				_ Change	Addition_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD EWING, ROBERT 10508 ASHLEY OAKS RIVERVIEW, FL 33569		D Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SALISBURY, TROY 7406 MINT JULEP RIVERVIEW, FL 33569		□ Delete	TITLE NAME STREET ADDRESS CITY+ST-ZIP				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	vertify that the information supplied with	thin files	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ad in Sa	oction 119 07/21/61 E	lorida Statutos	Change	

Thereby certify that the information supplied with this stilling does not quality for the exemption stated in Section 119.07(3)(1). 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #