2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2007 8:00 am
Secretary of State
04-20-2007 90076 011 ****61.25

DOCUMENT # N97000000501

1. Entity Name
ASHLEY OAKS MASTER ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4131 GUNN HIGHWAY TAMPA, FL 33624	4131 GUNN HIGHWAY TAMPA, FL 33624

03132007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2799766 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FRISCIA, FRANCIS E
MEIROSE & FIRSCIA, P.A.
500 NORTH WESTSHORE BLVD., STE. 635
TAMPA, FL 33609

7. Name and Address of New Registered Agent

Name: Crista L. Sterling, Esq.
Street: Macfarlane, Ferguson, & McMullen
201 N. Franklin Street, Suite 2000
City: Tampa, FL 33602 Zip Code

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 _____ 4/18/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD THOMAS, MICHAEL 4131 GUMM HWY TAMPA, FL 33618	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition PD Thomas, Michael 4131 Gunn Highway Tampa, FL 33618
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD FELLCETTI, LOUIS 4131 GUNN HWY TAMPA, FL 33618	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition TD Felicetti, Louis 4131 Gunn Highway Tampa, FL 33618
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PELLERITO, PAT 4131 GUNN HWY TAMPA, FL 33618	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition VPD Salisbury, Troy 4131 Gunn Highway Tampa, FL 33618
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SALISBURY, TROY 4131 GUNN HWY TAMPA, FL 33618	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition SD Mills, Rebecca 4131 Gunn Highway Tampa, FL 33618
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MILLS, REBECCA 4131 GUNN HIGHWAY TAMPA, FL 33618	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☑ Addition D Montgomery, Patricia 4131 Gunn Highway Tampa, FL 33618
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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

SIGNATURE: _____ Louis Felicetti 4/10/07 (813)741-1126
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #