

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002724

FILED
Apr 05, 2011
Secretary of State

Entity Name: ASHTON OAKS AT STONEBRIDGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

C/O R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104

New Mailing Address:

FEI Number: 65-0756991 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: TD
Name: ROWND, THOMAS
Address: 2256 ASHTON OAKS LANE #103
City-St-Zip: NAPLES, FL 34109

Title: VPD
Name: PUNTIL, RONALD
Address: 2256 ASHTON OAKS LANE #102
City-St-Zip: NAPLES, FL 34109

Title: PD
Name: LANE, WILLIAM
Address: 2272 ASHTON OAKS LANE #102
City-St-Zip: NAPLES, FL 34109

Title: D
Name: ALEX, DOROTHY
Address: 2288 ASHTON OAKS LANE #203
City-St-Zip: NAPLES, FL 34109

Title: SD
Name: BROOKS, CHUCK
Address: 2304 ASHTON OAKS LN #202
City-St-Zip: NAPLES, FL 34109

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: WILLIAM LANE

PD

04/05/2011

Electronic Signature of Signing Officer or Director

Date