

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002724

FILED  
Mar 20, 2012  
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: PD  
Name: PUNTIL, RONALD  
Address: 2256 ASHTON OAKS LANE #102  
City-St-Zip: NAPLES, FL 34109

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

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

Title: VPD  
Name: COE, LOU  
Address: 7219 NORTH CHARLES WAY  
City-St-Zip: PEORIA, IL 61614

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: RONALD M PUNTIL

PD

03/20/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date