2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCLIMENT # NIGRODOOGER

FILED Jan 18, 2005 8:00 am Secretary of State

01-18-2005 90060 011 ****61.25

1. Entity Name ASHWOOD HOMEOWNERS ASSOCIATION OF BREVARD, INC.		
Principal Place of Business	5	
2. Principal Place of Business 3. Mailing Address		
Suite, Apt. #, etc. Suite, Apt. #, etc. 01072005 Chg-NP	CR2E037 (10/03)	
City & State	- + `	plied For t Applicable
Zip Country Zip Country 5. Certificate of Status Desired	\$8.75 Add	itional
6. Name and Address of Current Registered Agent 7. Name and Address of New 1	Registered Agent	
LANSING, JAMES K PRES. 3904 UPMANN DR. ROCKLEDGE, FL 32955 Name JOHNTY BAS HER Street Address (P.O. Box Number is Not Acceptable 2005) Street Address (P.O. Box Number is Not Acceptable 2005) Street Address (P.O. Box Number is Not Acceptable 2005)		
City ROCKLEDGE 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 Fig.	FL Zip Code	
the obligations of registered agent.		and accept
SIGNATURE— Slorature, typed or printed halve of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	0//205 DATE	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

MANNY DASAVI.

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

011205

321-637-1424

Daytime Phone #