

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000868

FILED  
Feb 28, 2012  
Secretary of State

**Entity Name:** ASHWOOD HOMEOWNERS ASSOCIATION OF BREVARD, INC.

**Current Principal Place of Business:**

4240 VENTANA BLVD.  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 560615  
ROCKLEDGE, FL 32956

**New Mailing Address:**

**FEI Number:** 59-3519448

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ANDRES, YEPES  
3902 UPMANN DR  
ROCKLEDGE, FL 32955 US

**Name and Address of New Registered Agent:**

HILL, SHARON K  
3984 ORION WAY  
ROCKLEDGE, FL 32955 US

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: SHARON K. HILL

02/28/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HILL, RICHARD L  
Address: PO BOX 560615  
City-St-Zip: ROCKLEDGE, FL 329560615

Title: V  
Name: WINTERS, TRACY HILL  
Address: PO BOX 560615  
City-St-Zip: ROCKLEDGE, FL 329560615

Title: T  
Name: HILL, SHARON K  
Address: PO BOX 560615  
City-St-Zip: ROCKLEDGE, FL 329560615

Title: S  
Name: MCFALLS, ELOISE  
Address: PO BOX 560615  
City-St-Zip: ROCKLEDGE, FL 329560615

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: SHARON K. HILL

T

02/28/2012

Electronic Signature of Signing Officer or Director

Date