

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State
05-03-2001 91011 046 ****61.25

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DOCUMENT # N99000005237

1. Entity Name

ASHTON BIODIVERSITY RESEARCH & PRESERVATION INST

Principal Place of Business

**22215 SOUTHWEST 119TH AVENUE
ARCHER FL 32618
US**

Mailing Address

**~~5745 SW 75 STREET #PMB3001
GAINESVILLE FL 32609~~**

2. Principal Place of Business

3. Mailing Address

14260-331 West Newberry Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Newberry, Florida

4. FEI Number

59-3613952

Applied For

Not Applicable

Zip

Country

Zip

Country

32669**USA**5. Certificate of Status Desired. ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ASHTON, RAY E JR**~~5745 SW 75 STREET #PMB3001
GAINESVILLE FL 32609~~**

Name

Street Address (P.O. Box Number is Not Acceptable)
14260-331 West Newberry Road

City

Newberry**FL**Zip Code
32669

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees****Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Delete
NAME	MUSHINSKY, HENRY	
STREET ADDRESS	5745 SW 75 STREET #PMB3001	
CITY-ST-ZIP	GAINESVILLE FL 32609	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	14260-331 West Newberry Road	
CITY-ST-ZIP	Newberry, Florida 32669	

TITLE	D	<input type="checkbox"/> Delete
NAME	ASHTON, PATRICIA S	
STREET ADDRESS	5745 SW 75 STREET #PMB3001	
CITY-ST-ZIP	GAINESVILLE FL 32609	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	14260-331 West Newberry Road	
CITY-ST-ZIP	Newberry, Florida 32669	

TITLE	D	<input type="checkbox"/> Delete
NAME	ASHTON, RAY E JR	
STREET ADDRESS	5745 SW 75 STREET #PMB3001	
CITY-ST-ZIP	GAINESVILLE FL 32609	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	14260-331 West Newberry Road	
CITY-ST-ZIP	Newberry, Florida 32669	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:  **SIGNATURE OF RAY E. ASHTON, JR.** April 27, 2001 352-495-7449

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1 CR2E037 (10/00)