

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90182 030 *****70.00

DOCUMENT # N99000005237

1. Entity Name

**ASHTON BIODIVERSITY RESEARCH & PRESERVATION INST
TUTE, INC.**



Principal Place of Business

**14260 NEWBERRY ROAD
NEWBERRY FL 32669
US**

Mailing Address

**14260 NEWBERRY ROAD
NEWBERRY FL 32669
US**

2. Principal Place of Business

22215 Southwest 119th Avenue

3. Mailing Address

14260 West Newberry Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Private Mail Box 331

City & State

Archer, Florida

City & State

Newberry, Florida

Zip

32618

Country

United States

Zip

32669

Country

United States

4. FEI Number **59-3613952**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ASHTON, RAY E JR
14260- 331 WEST NEWBERRY ROAD
NEWBERRY FL 32669**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **MUSHINSKY, HENRY**
STREET ADDRESS **14260- 331 WEST NEWBERRY ROAD**
CITY-ST-ZIP **NEWBERRY FL 32669**

TITLE **D** ☐ Delete
NAME **ASHTON, PATRICIA S**
STREET ADDRESS **14260- 331 WEST NEWBERRY ROAD**
CITY-ST-ZIP **NEWBERRY FL 32669**

TITLE **D** ☐ Delete
NAME **ASHTON, RAY E JR**
STREET ADDRESS **14260- 331 WEST NEWBERRY ROAD**
CITY-ST-ZIP **NEWBERRY FL 32669**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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: Ray E. Ashton, Jr. January 22, 2003 352-495-7449

CR2E037 (10/02)