## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT #** P01000091509



## **FILED** Mar 24, 2003 8:00 am Secretary of State

ASHTON	N BUILDE	RS, INC.						03-24-2003 9	90229 00	93 ***15	50.00	
Principal Place of Business 508-A CAPITAL CIR. SE TALLAHASSEE FL 32301			508-	Mailing Address 508-A CAPITAL CIR. SE TALLAHASSEE FL 32301								
2. Principal	Place of Busi	ness	3. Ma	lling Address	<del>-</del> u							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			_	☐ CHECK HERE I	F MAKING	i CHANGI	ES .		
City & State			City	City & State			4. FEI Number 59-3748374				Applied For	
Zip		Country	Zip		Count	ту	<b>5.</b> C	Certificate of Status Desired		<b>\$8.75</b> A Fee Requ	Not Applicable Additional ired	
6. Name and Address of Current F			nt Register	Registered Agent		7.		7. Name and Address of New Registered Agent			1	
	-,					_Name		·				
THOMPSON, SUSAN S 3250 THOMASVILLE RD., 4TH FL TALLAHASSEE FL 32308					Street Address (P.C			ox Number is Not Acceptable)				
	100LL   L 32	2000				City			FL	Zip Co	ode	
8. The above the obliga	e named entite	y submits this statement tered agent.	for the purp	ose of changing its	registere	d office or regist	tered age	nt, or both, in the State of Flor		1 '		
SIGNATURE		or printed name of registered age	ent and title if one						_			
				licable. (NOTE	E. Registered	Agent signature require	red when rain	untation)				
<del></del>			and this ii app	licable. (NOTE	E: Registered	Agent signature requir	red when rein	estating)	DATE			
		!! FEE IS \$150.00		licable. (NOTE	E: Registered	Agent signature requir	red when rein					
Afte Make Chec	er May 1, 200		0	licable. (NOTE	E: Registered	Agent signature requir	red when rein	9. Election Campaign Fina Trust Fund Contribution.	ncing	<b>\$5.</b> Add	00 May Be	
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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 of trustee encowered to execute this report as required by Chapter 607, 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:** 

3-21-03

656-4663