

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000501

Entity Name: ASHLEY OAKS MASTER ASSOCIATION, INC.**Current Principal Place of Business:**4131 GUNN HIGHWAY
TAMPA, FL 33618**Current Mailing Address:**4131 GUNN HIGHWAY
TAMPA, FL 33618**FEI Number:** 59-2799766**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FRISCIA, FRANCIS E
FRISCIA & ROSS P.A.
5550 W. EXECUTIVE DR. SUITE 250
TAMPA, FL 33609 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:** FRANCIS E. FRISCIA**03/30/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	D	Title	TD, SECRETARY
Name	GREENHALGH, DEIDRA	Name	BLAUCH, TOM
Address	4131 GUNN HIGHWAY	Address	4131GUNN HIGHWAY
City-State-Zip:	TAMPA FL 33618	City-State-Zip:	TAMPA FL 33618
Title	PD	Title	D
Name	KOUVERAS, ROBERT	Name	BURT, DAVID
Address	4131 GUNN HWY	Address	4131 GUNN HIGHWAY
City-State-Zip:	TAMPA FL 33618	City-State-Zip:	TAMPA FL 33618
Title	DIRECTOR		
Name	LEHMANN, PETER		
Address	4131 GUNN HIGHWAY		
City-State-Zip:	TAMPA FL 33618		

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: ROBERT KOUVERAS**PRESIDENT****03/30/2023**

Electronic Signature of Signing Officer/Director Detail

Date