# 2021 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M0100000437

Entity Name: ASHTON ORLANDO RESIDENTIAL, L.L.C.

Current Principal Place of Business:

1064 GREENWOOD BLVD. SUITE 124 LAKE MARY, FL 32746

### **Current Mailing Address:**

1064 GREENWOOD BLVD. SUITE 124 LAKE MARY, FL 32746 US

## FEI Number: 75-2721878

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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:	NO CHANGE TO REGISTERED AGENT.		09/21/2021
	Electronic Signature of Registered Agent		Date
Authorized Person(s) Detail :			
Title M	MGR	Title	MGR
Name E	BALOGH, KEN	Name	BOYDSON, CORY J.
	3820 MANSELL ROAD SUITE 400	Address	3820 MANSELL ROAD SUITE 400
City-State-Zip: A	ALPHARETTA GA 30022	City-State-Zip:	ALPHARETTA GA 30022
Title S	SOLE MEMBER	Title	AUTHORIZED REPRESENTATIVE
Name A	ASHTON WOODS USA L.L.C.	Name	TRAYNOR, JACK
	3820 MANSELL ROAD SUITE 400	Address	1064 GREENWOOD BLVD SUITE 124
City-State-Zip: A	ALPHARETTA GA 30022	City-State-Zip:	LAKE MARY FL 32746
Title A	AUTHORIZED REPRESENTATIVE	Title	AVP
Name F	FITZPATRICK, DANIEL	Name	WALKER, LISA
Address 1	1064 GREENWOOD BLVD SUITE 124	Address	1064 GREENWOOD BLVD SUITE 124
City-State-Zip: L	LAKE MARY FL 32746	City-State-Zip:	LAKE MARY FL 32746
Title A	AVP	Title	AUTHORIZED REPRESENTATIVE
Name V	WILLIAMS, REED	Name	CALHOUN, ANDON
Address 1	1064 GREENWOOD BLVD SUITE 124	Address	1064 GREENWOOD BLVD SUITE 124
City-State-Zip: L	LAKE MARY FL 32746	City-State-Zip:	LAKE MARY FL 32746

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PARALEGAL

#### SIGNATURE: STEFANIE R LOOMIS

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Sep 21, 2021 Secretary of State 2421566638CC

Certificate of Status Desired: No

09/21/2021

Date