## 2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000437

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

Jan 05, 2017 **Secretary of State** CC5807625344

**FILED** 

## **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 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC. 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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. 01/05/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Title MGR Title AR

RENY, JOHN Name BALOGH, KENNETH Name

Address 1405 OLD ALABAMA ROAD, SUITE 200 Address 1064 GREENWOOD BLVD.

SUITE 124

ROSWELL GA 30076 LAKE MARY FL 32746 City-State-Zip: City-State-Zip:

Title MGR Title **AVP** 

BOYDSTON, CORY J. **GUTHRIE, CHRISTINE JUDITH** Name Name

1405 OLD ALABAMA ROAD 1064 GREENWOOD BLVD. Address Address SUITE 124

SUITE 200

ROSWELL GA 30076 LAKE MARY FL 32746 City-State-Zip: City-State-Zip:

Title ASSISTANT VICE PRESIDENT Title SOLE MEMBER

BILGRAY, LISA ASHTON WOODS USA L.L.C. Name Name

1064 GREENWOOD BLVD. 1405 OLD ALABAMA ROAD Address Address

> SUITE 124 SUITE 200

LAKE MARY FL 32746 ROSWELL GA 30076 City-State-Zip: City-State-Zip:

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.

SIGNATURE: CORY BOYDSTON

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER

01/05/2017