

2007 FOR PROFIT CORPORATION ANNUAL REPORT

08-27-2007 90031 019 ***61.25
262358

FILED

07 AUG 28 PM 2:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 262358

1. Entity Name
FOXGLOVE, INC.



Principal Place of Business
1801 SOUTH SURF ROAD
FOXGLOVE
HOLLYWOOD, FL 33019

Mailing Address
1801 SOUTH SURF ROAD
FOXGLOVE
HOLLYWOOD, FL 33019

2. Principal Place of Business - No P.O. Box # 3. Mailing Address
11784 W. Sample Rd 11784 W. Sample Rd.

Suite, Apt. #, etc. #103

Suite, Apt. #, etc. #103

City & State: Coral Springs FL Coral Springs, FL

33065 USA 33065 USA

07112007 Chg-P CR2E034 (12/06)

4. FEI Number 59-1026420 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RABEN, RICHARD
2438 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020

7. Name and Address of New Registered Agent

United Community Mgt. Corp.
11784 W. Sample Rd. #103
Coral Springs FL 33065

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: Jamie Koster

8/22/07

FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007

9. Election Campaign Financing: Trust Fund Contribution \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
P	GROOVER, ROBERT	1801 SOUTH SURF ROAD	HOLLYWOOD, FL	☒
T	LAVAT, P	1801 SOUTH SURF RD	HOLLYWOOD, FL	☐
				☐
				☐
				☐
				☐
				☐

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	CHANGE	ADDITION
PD	Koster, Jamie	1801 S. Surf Rd #4G	Hollywood, FL 33019	☐	☒
TD		1801 S. Surf Rd. #2A		☒	☐
UPD	DeYoung, Richard	727 Augusta Dr.	Bridgeville, PA 15017	☐	☒
SD	Fineberg, Daniel	1801 S. Surf Rd #3H	Hollywood, FL 33019	☐	☒
D	Sinki, Gabe	807 Holly Lane	Cedar Grove, NC 27009	☐	☒
				☐	☐

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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 information.

SIGNATURE: Jamie Koster

8/22/07