

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742044

FILED
Jan 22, 2009
Secretary of State

Entity Name: FOX RUN (PHASE I) MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

P. O. BOX 272
PALM CITY, FL 34991

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 272
PALM CITY, FL 34991

New Mailing Address:

FEI Number: 59-2560807 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DODGE, DENNIS R MR.
2441 SW 15TH TERRACE
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: DODGE, DENNIS R
Address: 2441 SW 15TH TERR
City-St-Zip: PALM CITY, FL 34990 US

Title: V.P. () Delete
Name: RUBINO, CARL
Address: 1320 SW 25TH LANE
City-St-Zip: PALM CITY, FL 34990

Title: SEC () Delete
Name: BIERNAT, THOMAS
Address: 1279 SW 25TH LANE
City-St-Zip: PALM CITY, FL 34990

Title: TREA () Delete
Name: BODIE, WALTER
Address: 1260 SW 25TH LANE
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: MCLAUGHLIN, JOHN
Address: 2440 SW 15TH TERRACE
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: HORNBERGER, JOE
Address: 1377 SW 24TH LANE
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DENNIS R. DODGE

PRES

01/22/2009

Electronic Signature of Signing Officer or Director

_____ Date