2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#754690

FILED Mar 19, 2010 Secretary of State

Entity Name: FOXMOOR LAKES MASTER ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

GULFSHORE COMMUNITY ASSO. MGNT

C/O GULFSHORE COMMUNITY ASSO. MGNT 76 PONDELLA ROAD SUITE 201 N FT MYERS, FL 33906

76 PONDELLA ROAD SUITE 201

N FT MYERS, FL 33903

Current Mailing Address:

New Mailing Address:

C/O GULFSHORE COMMUNITY ASSO. MGNT 76 PONDELLA ROAD SUITE 201

Name and Address of Current Registered Agent:

GULFSHORE COMMUNITY ASSO. MGNT 76 PONDELLA ROAD SUITE 201 N FT MYERS, FL 33903

N FT MYERS, FL 33906

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of New Registered Agent:

GULFSHORES COMMUNITY ASSOC MGT 76 PONDELLA RD.

LAPOSTA, RICHARD L 76 PONDELLA RD.

SUITE #201

FEI Number: 59-2068748

SUITE #201

FORT MYERS, FL 33903 US

FORT MYERS, FL 33903 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: RICHARD L. LAPOSTA

03/19/2010

Electronic Signature of Registered Agent

FEI Number Applied For ()

Date

OFFICERS AND DIRECTORS:

DOTY, ROBERT Name: Address: 5691 LONG LEAF DR

City-St-Zip: NORTH FORT MYERS, FL 33917

Title:

Name: SCHILFFARTH, FRED Address: 15508 CRYSTAL LAKE DR City-St-Zip: NORTH FORT MYERS, FL 33917

Title: DT

COHEN, DAVE Name:

Address: 15461 CRYSTAL LAKE DR City-St-Zip: NORTH FORT MYERS, FL 33917

Title:

DP

Name: MARRIOTT, JOHN Address: 5678 FOX LAKE DR

NORTH FORT MYERS, FL 33917 City-St-Zip:

Title: DVP

Name: KIME, WILMA 5591 FOX LAKE DR Address:

NORTH FORT MYERS, FL 33917 City-St-Zip:

Title:

LIGNELL. SANDRA Name: Address: 15413 CRYSTAL LAKE DR NORTH FORT MYERS, FL 33917 City-St-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 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: JOHN MARRIOTT

DP

03/19/2010