## 6-24-97 B-7896 € FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

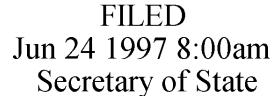
Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 75587

(7)

FOXCROSS CONDOMINIUM ASSOCIATION, INC.





Principal Place of Business Mailing Address						<u> </u>		
6500 MARINER SANDS DR 6500 MARINER SANDS DR STUART FL 34997 STUART FL 34997-8723								
					3. Date Incorporated or Qualified 01/13/1981	3a. Date of Las 07/02/		
2. Principal F	Place of Business	2e. Mailing Address		4. FEI Number 59-2055156	Applied For Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be		
Zip	Country	Country Zip		,	Trust Fund Contribution  8. This corporation has liability for		led to Fees er s. 199.032.	
24	25   29   3 9. Name and Address of Current Registered Agent		10	Florida Statutes		Yes ☐ No		
·	g. Name and Address of Current	Registered Agent		г	10. Name and Address of New Re	gistered Agent		
			81	Name				
SHAW, DANIEL W. 6500 MARINER SANDS DRIVE				Street	Address (P.O. Box Number is Not Acceptat	ile)	· ·	
STUART FL 34997			83	7	THE PARTY OF THE P			
2.2	in the second se		64	City		<b>85</b> Z	ip Code	
11. Pursuant	to the provisions of Sections 617 0503	and 617 1500 Florida Statutos	the show			FLII	•	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.								
SIGNATURE .	Signature, typed or printed name of registered agen				required when reinstating)	DATE		
12.	OFFICERS AND		13.	an eigenture	ADDITIONS/CHANGES TO OFFIC		ORS IN 12	
TITLE	VD	DELETE	1.1 TITLE		&D	Chang		
NAME	CLIFFORD, WILLIAM	-	1.2 NAME		SPILLSON, ROSE MARY		,	
STREET ADDRESS	1		1.3 STREET ADDRESS 65		6500 MARINER SANDS	i Or		
CITY-ST-ZIP					STUART, FL 34997			
TITLE	PD	DELETE	2.1 TITLE	<del>`                                    </del>	2,0,3,1,7	Chanc	ge Addition	
NAME	MULLIGAN, JAMES F		2.2 NAME	- !			,	
STREET ADDRESS	6500 MARINER SANDS DR.		2.3 STREET ADDRESS					
CITY-ST-ZIP	STUART, FL 00000		2. 4 CITY - S	- 1				
TITLE	TD	☐ DELETE	3.1 TITLE	-		Chang	e Addition	
NAME	A ATTAINMENT A SE SESSE		3.2 NAME					
STREET ADDRESS	6500 MARINER SANDS DR.		3.3 STREET	ADDRESS			[	
CITY-ST-ZIP	STUART, FL 00000		3.4. CITY-S	T-ZIP			ŀ	
TITLE	\$D	DELETE	4.1 TITLE		<b>V</b> Ø	Chang	ge Addition	
NAME	COX, ROBERT		4. 2 NAME		COX, ROBERT	_		
STREET ADDRESS	6500 MARINER SANDS DR.		4.3 STREET		6500 MARINER SANOS DA	<b>,</b>		
CITY-ST-ZIP	STUART FL		4.4 CITY-ST	r- <b>Z</b> iP	STUART FL 34997			
TITLE	D	☐ DELETE	51 TITLE			☐ Chang	e Addilion	
NAME	SULLIVAN, CHARLOTTE		5.2 NAME				ļ	
STREET ADDRESS	6500 MARINER SANDS DR.		5.3 STREET	ADDRESS				
CITY-ST-ZIP	STUART FL		5.4 CfTY - S1	-ZIP				
TITLE	D.					☐ Chang	e Addition	
NAME	PROVOST, ROBERT S.		6.2 NAME	1			ŀ	
STREET ADDRESS	6500 MARINER SANDS DRIVE		6.3 STREET	ADDRESS				
CITY-ST-ZIP	STUART FL		6.4 CITY - S1					
14. I do harab	by carrify that the information supplied	with this filling does not auglify t	or the ever	notion et	ated in Section 119 07/3)(i) Florida Statutos	I further entify the	at the	

I do nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this appual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or man attachment with an address.

CR2E037 (9/96)