

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757275

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: FOX CHASE WEST CONDOMINIUM NO. 2 ASSOCIATION, INC.

**Current Principal Place of Business:**

3300 FOX CHASE CIR N  
PALM HARBOR, FL 34683 US

**New Principal Place of Business:**

**Current Mailing Address:**

PREMIER MGMT  
FOXCHAASE 2- P O BOX 2593  
TARPON SPRINGS, FL 34689 US

**New Mailing Address:**

PREMIERE MGMT  
P O BOX 143  
NEW PORT RICHEY, FL 34654 US

FEI Number: 59-2107088

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PREMIERE MANAGEMENT SVC  
9228 CALLE ALTA CT  
NEW PORT RICHEY, FL 34655 US

**Name and Address of New Registered Agent:**

PREMIERE MANAGEMENT SVC  
11922 TEE TIME CIRCLE  
NEW PORT RICHEY, FL 34654 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: JOSEPH D. SPROWLS

04/29/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: STD ( ) Delete  
Name: RINGELSPAUGH, DOROTHY  
Address: 3300 FOX CHASE CIR N. #221  
City-St-Zip: PALM HARBOR, FL 34683

Title: VPD ( ) Delete  
Name: RINGELSPAUGH, ROBERT  
Address: 3300 FOX CHASE CIR N. #221  
City-St-Zip: PALM HARBOR, FL 34683

Title: PD ( ) Delete  
Name: FOGARTY, BARBARA  
Address: 3300 FOX CHASE CIR. N. #222  
City-St-Zip: PALM HARBOR, FL 34683

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: RINGELSPAUGH, DOROTHY  
Address: 3300 FOX CHASE CIR N. #221  
City-St-Zip: PALM HARBOR, FL 34683

Title: STD (X) Change ( ) Addition  
Name: FOGARTY, JAMES  
Address: 3300 FOX CHASE CIR N. #222  
City-St-Zip: PALM HARBOR, FL 34683

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES FOGARTY

SD

04/29/2005

Electronic Signature of Signing Officer or Director

Date