

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90042 033 ****61.25

DOCUMENT # 760532

1. Entity Name

FOXWOOD LAKE ESTATES PROPERTY OWNERS' ASSOCIATIO

Principal Place of Business

Mailing Address

4444 U.S. 98 N. #901
 LAKELAND FL 33809
 US

4444 U.S. 98 N. #901
 LAKELAND FL 33809
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2851144

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AVERILL, LEROY
4444 U.S. HWY 98 NORTH
LAKELAND 33809

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Leroy Averill

LEROY AVERILL, PRESIDENT

1/27/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	AVERILL, LEROY	4444 US HWY 98 N # 456	LAKELAND FL 33809	<input type="checkbox"/>
VD	SANFORD, SHAW	4444 US HWY 98 NORTH #557	LAKELAND FL 33809	<input type="checkbox"/>
SD	CAMP, RICHARD	4444 U.S. HWY., 98 NORTH #502	LAKELAND FL	<input type="checkbox"/>
TD	STEEL, KAY	4444 US HWY NORTH	LAKELAND FL	<input checked="" type="checkbox"/>
D	MANIAK, RUTH	4444 U.S. HWY. 98, NORTH #568	LAKELAND FL	<input type="checkbox"/>
D	CHAPIN, WENDEL	4444 US HWY 98 N	LAKELAND FL 33809	<input checked="" type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
D	CAMPIONE, RALPH	4444 US HWY 98N # 631	LAKELAND, FL 33809	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	SUDLOW, RONALD	444 US HWY 98N # 756	LAKELAND, FL 33809	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	PARKER, BILL	4444 US HWY 98N # 772	LAKELAND FL 33809	<input type="checkbox"/>	<input checked="" type="checkbox"/>
TD	FEIGLE, RICHARD L.	4444 US HWY NORTH #610	LAKELAND, FL 33809	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	DAWES, BOB	4444 US HWY 98N #600	LAKELAND FL 33809	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby 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 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 617, 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 empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard L. Feigle
RICHARD L. FEIGLE, TREASURER

Date

Daytime Phone #

1/27/00 (863) 859-6615