

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2005 8:00 am
Secretary of State

03-04-2005 90096 033 ****70.00

DOCUMENT # N20646 1. Entity Name FOXWOOD FARMS RESIDENTS, INC.			
Principal Place of Business 4500 NW BLITCHTON RD LOT 64 OCALA, FL 34482 US		Mailing Address 4500 NW BLITCHTON RD LOT 64 OCALA, FL 34482 US	
2. Principal Place of Business 1860 NW 46TH CIRCLE Suite, Apt. #, etc.		3. Mailing Address 1860 NW 46TH CIRCLE Suite, Apt. #, etc.	
City & State OCALA, FL. Zip 34482		City & State OCALA, FL. Zip 34482	
Country US		Country US	
4. FEI Number NOT APPLICABLE		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ORION, ED 4500 NW BLITCHTON RD LOT 64 OCALA, FL 34482		7. Name and Address of New Registered Agent Name JIM VANDE VELDE Street Address (P.O. Box Number is Not Acceptable) 1860 NW 46TH CIRCLE City OCALA FL Zip Code 34482	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Jim Vande Velde, President</i></u> DATE <u>03/03/05</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FURNEISEN, ALICE L ☒ Delete 4500 NW BLITCHTON RD #38 OCALA, FL 34482	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR ☒ Change ☐ Addition GARY JOHNSTON 4500 NW BLITCHTON RD. # 272 OCALA, FL. 34482
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ☐ Delete JEANNETTE, CAROLYN 4500 NW BLITCHTON RD #305 OCALA, FL 34482	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete SABIN, BUD 4500 NW BLITCHTON RD LOT # 207 OCALA, FL 34482	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Delete LAUN, PAUL 4500 NW BLITCHTON RD #55 OCALA, FL 34482	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR ☒ Change ☐ Addition MILDRED WICKS 4500 NW BLITCHTON RD. # 225 OCALA, FL. 34482
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ☐ Delete HAIDER, JOE 1865 46TH AVE OCALA, FL 34482	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete CHAPIN, RAYMOND 4500 NW BLITCHTON RD LT 101 OCALA, FL 34482	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: <u><i>Jim Vande Velde</i></u> JIM VANDE VELDE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE: <u>03/03/05</u> 352-368-7944 Daytime Phone #	

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