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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # 760532

(2)

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1. Corporation Name

FOXWOOD LAKE ESTATES PROPERTY OWNERS' ASSOCIATIO
N, INC.

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/21/1981

3a. Date of Last Report

02/01/1994

4. FEI Number

59-2851144

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MANN, GORDON
4444 U.S. HWY 98 NORTH
LAKELAND 33809

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

VD

NAME

MANN, GORDON

STREET ADDRESS

4444 U.S. HWY. 98 NORTH

CITY - ST - ZIP

LAKELAND, FL 00000

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

TITLE

PD

NAME

DAWES, ROBERT

STREET ADDRESS

4444 U.S. HWY. 98 NORTH

CITY - ST - ZIP

LAKELAND, FL 00000

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

TITLE

DS

NAME

SHAW, SANFORD

STREET ADDRESS

4444 U.S. HWY., 98 NORTH

CITY - ST - ZIP

LAKELAND FL

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE

DT

NAME

SCHROEDER, EARL

STREET ADDRESS

4444 U.S. HWY. 98N.

CITY - ST - ZIP

LAKELAND FL

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE

D

NAME

GOODLIFF, BETTY

STREET ADDRESS

4444 U.S. HWY. 98, NORTH

CITY - ST - ZIP

LAKELAND FL

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Robert L. Dawes
ROBERT L. DAWES
PRESIDENT

24 JAN 1995

Date

Signature #

813-859-5216

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