

FILE NOW: FILING FEE IS \$61.25

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Mar 12 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **753114** (8)  
1. Corporation Name  
**FOX CHASE PROPERTY OWNERS ASSOCIATION, INC.**



Principal Place of Business <b>16120 BRIDLEWOOD DRIVE DELRAY BEACH FL 33445 US</b>	Mailing Address <b>16120 BRIDLEWOOD DRIVE DELRAY BEACH FL 33445 US</b>
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2. Principal Place of Business <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip <b>24</b>	2a. Mailing Address c/o Association <b>26</b> Management Group <b>27</b> 7187 Thompson Rd <b>28</b> City & State <b>29</b> Lantana, FL <b>30</b> Zip <b>31</b> 33462 <b>32</b> Country <b>33</b> USA
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3. Date Incorporated or Qualified <b>06/25/1980</b>	4. FEI Number <b>59-2232078</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent <b>GIULIANO, ERMINIO P. 4422 GERMANTOWN ROAD DELRAY BEACH FL</b>	10. Name and Address of New Registered Agent <b>81</b> Name <b>HUCKABY, JANET</b> <b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>7187 Thompson Rd</b> <b>83</b> <b>84</b> City <b>Lantana</b> <b>FL</b> <b>85</b> Zip Code <b>33462</b>
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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 *Janet Huckaby* 3-8-98  
Signature typed or printed name of registered agent and fee applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PD</b>	NAME <b>ALONSO, RENE</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>16273 BRIDLEWOOD CIRCLE</b>	CITY-ST-ZIP <b>DELRAY BEACH FL</b>	1.2 NAME	
		1.3 STREET ADDRESS	
		1.4 CITY-ST-ZIP	
TITLE <b>VD</b>	NAME <b>GIULIANO, CATHERINE</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>4422 GERMANTOWN ROAD</b>	CITY-ST-ZIP <b>DELRAY BEACH FL</b>	2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
TITLE <b>TD</b>	NAME <b>D'AMATO, JOE</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>16452 BRIDLEWOOD CIRCLE</b>	CITY-ST-ZIP <b>DELRAY BEACH FL</b>	3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
TITLE <b>SD</b>	NAME <b>RUSSELL, MARGARET</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>16333 BRIDLEWOOD CIRCLE</b>	CITY-ST-ZIP <b>DELRAY BEACH FL</b>	4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
TITLE	NAME	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		5.2 NAME	
CITY-ST-ZIP		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
TITLE	NAME	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		6.2 NAME	
CITY-ST-ZIP		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Janet Huckaby* 3-8-98 (561) 965-4486

CR2E037 (1097)