

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747925

FILED  
Mar 25, 2005  
Secretary of State

Entity Name: FOXHALL AT SUNTREE ASSOCIATION, INC.

## Current Principal Place of Business:

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 327795044

## New Principal Place of Business:

## Current Mailing Address:

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 327795044

## New Mailing Address:

FEI Number: 59-2025614

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HART, JAMES W JR.  
C/O SENTRY MANAGEMENT INC  
2180 W. SR 434, STE. 5000  
LONGWOOD, FL 327795044 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LEATHEN, DORIS  
Address: 216 COUNTRY CLUB DR  
City-St-Zip: MELBOURNE, FL 32940

Title: VPD ( ) Delete  
Name: OKEEFE, JACK  
Address: 807 ROSA ST  
City-St-Zip: CELEBRATION, FL 32940

Title: SD ( ) Delete  
Name: EISSLER, EVELYN  
Address: 256 COUNTRY CLUB DR  
City-St-Zip: MELBOURNE, FL 32940

Title: TD ( ) Delete  
Name: GABRIEL, DIXIE  
Address: 230 COUNTRY CLUB DR  
City-St-Zip: MELBOURNE, FL 32940

Title: D ( ) Delete  
Name: WINCHESTER, TINY  
Address: 222 COUNTRY CLUB DR  
City-St-Zip: MELBOURNE, FL 32940

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GABRIEL, DIXIE  
Address: 230 COUNTRY CLUB DR  
City-St-Zip: MELBOURNE, FL 32940

Title: VPD (X) Change ( ) Addition  
Name: HICKEY, JAMES  
Address: 224 COUNTRY CLUB DR  
City-St-Zip: MELBOURNE, FL 32940

Title: SD (X) Change ( ) Addition  
Name: EISSLER, EVELYN  
Address: 265 COUNTRY CLUB DR  
City-St-Zip: MELBOURNE, FL 32940

Title: TD (X) Change ( ) Addition  
Name: BALDINI, EARNEST  
Address: 245 COUNTRY CLUB DR  
City-St-Zip: MELBOURNE, FL 32940

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: DIXIE GABRIEL

PD

03/25/2005

Electronic Signature of Signing Officer or Director

Date