

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753114

FILED  
Feb 03, 2010  
Secretary of State

**Entity Name:** FOXE CHASE PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

FIE ASSOCIATES INC  
16120 BRIDLEWOOD DR  
DELRAY BEACH, FL 33445 US

**New Principal Place of Business:**

**Current Mailing Address:**

FIE ASSOCIATES INC  
16120 BRIDLEWOOD DR  
DELRAY BEACH, FL 33445 US

**New Mailing Address:**

**FEI Number:** 59-2232078

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FIE ASSOCIATES INC  
16120 BRIDLEWOOD DRIVE  
ATTN:IRA GROSS  
DELRAY BEACH, FL 33445 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: P  
Name: FIRESTONE, DODEE C  
Address: 16120 BRIDLEWOOD DRIVE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D  
Name: KARUN, NORMA  
Address: 16120 BRIDLEWOOD DRIVE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: T  
Name: GOSS, STEPHEN  
Address: 16120 BRIDLEWOOD DRIVE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: S  
Name: GARDNER, BARBARA  
Address: 16120 BRIDLEWOOD DRIVE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP  
Name: MORAN, ROBERT  
Address: 16120 BRIDLEWOOD DRIVE  
City-St-Zip: DELRAY BEACH, FL 33445

I hereby 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 all other like empowered.

SIGNATURE: DODEE FIRESTONE

P

02/03/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date