Name and Address of Current Registered Agent:				
MATTALIANO, 905 CLYDESDA LOXAHATCHEI				
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	E DEBRA A. MATTALIANO			04/19/2019
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	PD	Title	VPD	
Name	GRIBBLE, NANCY	Name	FERGUSON, THOMAS	
Address	1525 GALLOP DRIVE	Address	17838 SHELAND LANE	
City-State-Zip:	LOXAHATCHEE FL 33470	City-State-Zip:	LOXAHATCHEE FL 33470	

#### 2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL **REPORT**

**DOCUMENT# 734488** 

Entity Name: FOX TRAIL PROPERTY OWNERS' ASSOCIATION, INC.

## **Current Principal Place of Business:**

1525 GALLOP DRIVE LOXAHATCHEE, FL 33470

## **Current Mailing Address:**

P.O. BOX 211 LOXAHATCHEE, FL 33470

STD

City-State-Zip: LOXAHATCHEE FL 33470

MATTALIANO, DEBRA A

905 CLYDESDALE DRIVE

# FEI Number: 59-2583893

Title

Name

Address

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.

STD

SIGNATURE: DEBRA A. MATTALIANO

Electronic Signature of Signing Officer/Director Detail

FILED Apr 19, 2019 Secretary of State 7085910064CC

Certificate of Status Desired: Yes

04/19/2019

Date