

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753114

**FILED
Apr 09, 2019
Secretary of State
2324905754CC**

Entity Name: FOXE CHASE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O SUPERIOR ASSOCIATION MANAGEMENT
20283 STATE ROAD 7 SUITE # 219
BOCA RATON, FL 33498

Current Mailing Address:

C/O SUPERIOR ASSOCIATION MANAGEMENT
20283 STATE ROAD 7 SUITE #219
BOCA RATON, FL 33498 US

FEI Number: 59-2232078

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SUPERIOR ASSOCIATION MANAGEMENT
C/O SUPERIOR ASSOCIATION MANAGEMENT.
20283 STATE ROAD 7 SUITE # 219
BOCA RATON, FL 33498 US

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: SHERI SCARBOROUGH

04/09/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name COHEN, JEFF
Address 16420 BRIDLEWOOD CIRCLE
City-State-Zip: DELRAY BEACH FL 33445

Title VP
Name NOHE, OLGA
Address 16373 BRIDLEWOOD CIRCLE
City-State-Zip: DELRAY BEACH FL 33445

Title TREASURER
Name BERMAN, DEBORAH
Address 16516 BRIDLEWOOD CIRCLE
City-State-Zip: DELRAY BEACH FL 33445

Title SECRETARY
Name PETRUCCI, STEPHEN
Address 16289 BRIDLEWOOD CIRCLE
City-State-Zip: DELRAY BEACH FL 33445

Title DIRECTOR
Name PALERMO, JOSEPH
Address 16421BRIDLEWOOD CIRCLE
City-State-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: JEFF COHEN

PRESIDENT

04/09/2019

Electronic Signature of Signing Officer/Director Detail

Date