

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 755873

**Entity Name:** FOXCROSS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

543 NW LAKE WHITNEY PLACE  
SUITE 101  
PORT ST LUCIE, FL 34986

**Current Mailing Address:**

543 NW LAKE WHITNEY PLACE  
SUITE 101  
PORT ST LUCIE, FL 34986

**FEI Number:** 59-2055156

**Certificate of Status Desired:** No

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

INGLIS, STEVE  
BRISTOL MANAGEMENT SERVICES INC  
1930 COMMERCE LN #1  
JUPITER, FL 33458 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MORAN, JACK  
Address 1930 COMMERCE LANE  
City-State-Zip: JUPITER FL 33458

Title DIRECTOR  
Name DITMARS, DOUGLAS  
Address 1930 COMMERCE LANE  
City-State-Zip: JUPITER FL 33458

Title SECRETARY  
Name KALOUSEK, MAUREEN  
Address 1930 COMMERCE LANE  
City-State-Zip: JUPITER FL 33458

Title TREASURER  
Name CRONIN, KATHY  
Address 1930 COMMERCE LANE  
City-State-Zip: JUPITER FL 33458

Title VP  
Name MCANDREWS, RANDALL  
Address 1930 COMMERCE LANE  
City-State-Zip: JUPITER FL 33458

*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:** JACK MORAN

**PRESIDENT**

**04/10/2013**

Electronic Signature of Signing Officer/Director Detail

Date