

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02206

**FILED**  
**Mar 13, 2015**  
**Secretary of State**  
**CC1736716549**

**Entity Name:** FOX CHASE WEST CONDOMINIUM NO. 4 ASSOCIATION, INC.

**Current Principal Place of Business:**

40347 U.S. 19 NORTH  
SUITE #201  
TARPON SPRINGS, FL 34689

**Current Mailing Address:**

P.O. BOX 695  
TARPON SPRINGS, FL 34689

**FEI Number:** 59-2421207

**Certificate of Status Desired:** No

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

KARAGIANIS, IRENE  
40347 U.S. 19 N. #201  
TARPON SPRINGS, FL 34689 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            VPD  
Name            PORCELLI, RAYMOND M  
Address        71 ROMA ORCHARD ROAD  
City-State-Zip: PEAKSKILL NY 10566

Title            PRESIDENT  
Name            LAMORTE, RAFAELA  
Address        3259 FOX CHASE CIRCLE N. #205  
City-State-Zip: PALM HARBOR FL 34683

*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:** RAFAELA LAMORTE

**PRESIDENT**

**03/13/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date