

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29209

Entity Name: FOX RUN HOMEOWNERS' ASSOCIATION OF TAVARES, INC.**Current Principal Place of Business:**440 FOX RUN BLVD
TAVARES, FL 32778**Current Mailing Address:**440 FOX RUN BLVD
TAVARES, FL 32778**FEI Number:** 59-2678093**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DEREK SCHROTH, BOWEN RADSON SCHROTH, P.A.
600 JENNINGS AVENUE
EUSTIS, FL 32726 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 DIRECTOR
Name CHESSER, SAM
Address 3020 MANATEE ROAD
City-State-Zip: TAVARES FL 32778

Title TREASURER, DIRECTOR
Name KILGORE, CHERYL
Address 3546 MANATEE ROAD
City-State-Zip: TAVARES FL 32778

Title DIRECTOR
Name DAHL, ROGER
Address 445 ST. JOHNS ROAD
City-State-Zip: TAVARES FL 32778

Title VP, DIRECTOR
Name HARTMAN, WAYNE
Address 3104 WEKIVA ROAD
City-State-Zip: TAVARES FL 32778

Title DIRECTOR
Name OELKE, LLOYD
Address 3323 MANATEE ROAD
City-State-Zip: TAVARES FL 32778

Title SECRETARY, DIRECTOR
Name SINGLEY, NANCY
Address 3320 MYAKKA RIVER ROAD
City-State-Zip: TAVARES FL 32778

Title DIRECTOR
Name BURKE, KAREN
Address 456 KING WAY
City-State-Zip: TAVARES FL 32778

Title DIRECTOR
Name CECELIA, EVERIST
Address 506 FOX RUN BLVD
City-State-Zip: TAVARES FL 32778

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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: ROBERT ROSKI**PRESIDENT****01/05/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	PRESIDENT, DIRECTOR
Name	ROBERT, ROSKI
Address	3108 WEKIVA ROAD
City-State-Zip:	TAVARES FL 32778