

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N41468

**Entity Name:** FOXWOOD VILLAGE ASSOCIATION, INC.

**Current Principal Place of Business:**

4700 FOXWOOD BLVD  
#358  
LAKELAND, FL 33810

**Current Mailing Address:**

4700 FOXWOOD BLVD  
BOX 358  
LAKELAND, FL 33810 US

**FEI Number: 59-3047294**

**Certificate of Status Desired: No**

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

REYNOLDS, JEAN  
4700 FOXWOOD BLVE  
#358  
LAKELAND, FL 33810 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: JEAN REYNOLDS**

**12/03/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            REYNOLDS, JEAN  
Address        4700 FOXWOOD BLVD  
                  BOX 358  
City-State-Zip: LAKELAND FL 33810

Title            VP  
Name            OPEN, OFFICE  
Address        4700 FOXWOOD BLVD  
                  #358  
City-State-Zip: LAKELAND FL 33810

Title            SECRETARY  
Name            BRINKMAN, CHRISTINE  
Address        4700 FOXWOOD BLVD  
                  #358  
City-State-Zip: LAKELAND FL 33810

Title            TREASURER  
Name            TOMAN, DAWNEEN  
Address        4700 FOXWOOD BLVD  
                  #358  
City-State-Zip: LAKELAND FL 33810

Title            DIRECTOR  
Name            CRAMER, DIANE  
Address        4700 FOXWOOD BLVD  
                  #358  
City-State-Zip: LAKELAND FL 33810

Title            DIRECTOR  
Name            OPEN, OFFICE  
Address        4700 FOXWOOD BLVD.  
                  #358  
City-State-Zip: LAKELAND FL 33810

Title            DIRECTOR  
Name            OPEN, OFFICE  
Address        4700 FOXWOOD BLVD.  
City-State-Zip: LAKELAND FL 33810

*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: DAWNEEN M TOMAN**

**TREASURER**

**12/03/2021**

Electronic Signature of Signing Officer/Director Detail

Date