

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000000999

**Entity Name:** FOXCHASE CIVIC ASSOCIATION, INC.**Current Principal Place of Business:**2646 TRAMORE PL  
ORANGE PARK, FL 32065**Current Mailing Address:**2646 TRAMORE PL  
ORANGE PARK, FL 32065 US**FEI Number:** 59-3148672**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CRABTREE & FALLAR, P. A.  
8375 DIV ELLIS TRAIL  
STE 401  
JACKSONVILLE, FL 32256 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	PD
Name	KREINEST, PAM
Address	2645 TRAMORE PL
City-State-Zip:	ORANGE PARK FL 32065

Title	VPD
Name	SANDERS, CHRIS
Address	2634 TRAMORE PL
City-State-Zip:	ORANGE PARK FL 32065

Title	TD
Name	GIBSON, CATHY
Address	2646 TRAMORE PL
City-State-Zip:	ORANGE PARK FL 32065

Title	SECRETARY
Name	FLOWERS, EDDIE
Address	2646 TRAMORE PL
City-State-Zip:	ORANGE PARK FL 32065

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:** CATHY GIBSON**TREASURER****04/12/2018**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date