

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 262358

Entity Name: FOXGLOVE, INC.

FILED
Jun 23, 2009
Secretary of State

Current Principal Place of Business:

11784 W SAMPLE RD
#103
CORAL SPRINGS, FL 33065

New Principal Place of Business:

2130 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020

Current Mailing Address:

11784 W SAMPLE RD
#103
CORAL SPRINGS, FL 33065

New Mailing Address:

2130 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020

FEI Number: 59-1026420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RABEN, RICHARD CPA
2130 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KOSTER, JAMIE
Address: 1801 S. SURF RD #4G
City-St-Zip: HOLLYWOOD, FL 33019

Title: TD () Delete
Name: LAVAT, P
Address: 1801 S. SURF RD. #2A
City-St-Zip: HOLLYWOOD, FL 33019

Title: VD () Delete
Name: DEYOUNG, RICHARD
Address: 727 AUGUSTA DR
City-St-Zip: BRIDGEVILLE, PA 15017

Title: SD () Delete
Name: FINEBERG, DANIEL
Address: 1801 S SURF RD #3H
City-St-Zip: HOLLYWOOD, FL 33019

Title: D () Delete
Name: SINKI, GABE
Address: 807 HOLLY LANE
City-St-Zip: CEDAR GROVE, NJ 07009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAT LAVAT

TD

06/23/2009

Electronic Signature of Signing Officer or Director

Date