

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731510

FILED
Mar 05, 2012
Secretary of State

Entity Name: FOXCROFT CONDOMINIUM APARTMENTS, INC.

Current Principal Place of Business:

3494 FOXCROFT ROAD
MIRAMAR, FL 33025

New Principal Place of Business:

Current Mailing Address:

3494 FOXCROFT ROAD
MIRAMAR, FL 33025

New Mailing Address:

FEI Number: 59-1595885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALTON, JONES & BROWN
1999 SW 27TH AVENUE - FIRST FLOOR
MIAMI, FL 33145 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

OFFICERS AND DIRECTORS:

Title: D
Name: PAHALAN, KRIS
Address: 3285 FOXCROFT RD. E-103
City-St-Zip: MIRAMAR, FL 33025

Title: P
Name: ABOITE, MARGARET
Address: 3195 FOXCROFT RD F315
City-St-Zip: MIRAMAR, FL 33025

Title: D
Name: WILLIAMS, KIMBERLEE
Address: 3490 FOXCROFT RD. B-105
City-St-Zip: MIRAMAR, FL 33025

Title: S
Name: PEDLAR, SHERESE
Address: 3390 FOXCROFT RD C211
City-St-Zip: MIRAMAR, FL 33025

Title: D
Name: BLACK, SHERYL-ANN
Address: 3285 FOXCROFT RD.
City-St-Zip: MIRAMAR, FL 33025

Title: D
Name: COURVILLE, RENEE
Address: 3195 FOXCROFT RD. F304
City-St-Zip: MIRAMAR, FL 33025

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: MARGARET ABOITE

P

03/05/2012

Electronic Signature of Signing Officer or Director

Date