

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 09, 2002 8:00 am
Secretary of State

09-09-2002 90021 015 ****61.25

DOCUMENT # 739816

1. Entity Name

FOX RIDGE HOMEOWNERS AND CIVIC ASSOCIATION, INC.

Principal Place of Business

Mailing Address

P O BOX 52
 ORANGE PARK FL 32067-7052

P O BOX 52
 ORANGE PARK FL 32067-7052

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2575310

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WADE, M. BURT
2570 BOTTOMRIDGE DR
ORANGE PARK FL 32065

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
min. will be \$236.25.

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD Delete
 NAME MCCRORK, JOHN
 STREET ADDRESS 677 RIDGESTONE CT.
 CITY-ST-ZIP ORANGE PARK FL

TITLE PD Change Addition
 NAME HILL RANDI
 STREET ADDRESS 2589 CATAWBA RIDGE CT
 CITY-ST-ZIP ORANGE PARK FL 32065

TITLE TD Delete
 NAME GERMANN, THOMAS
 STREET ADDRESS 957 MARBLERIDGE DR.
 CITY-ST-ZIP ORANGE PARK FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE SD Delete
 NAME MELTON, DIANE
 STREET ADDRESS 945 CEDAR RIDGE CT
 CITY-ST-ZIP ORANGE PARK FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE V Delete
 NAME HILL, RANDI
 STREET ADDRESS 2589 CATAWBA RIDGE CT
 CITY-ST-ZIP ORANGE PARK FL

TITLE V Change Addition
 NAME CHANCEY, TONEY
 STREET ADDRESS 300 FOXRIDGE ROAD
 CITY-ST-ZIP ORANGE PARK FL 32065

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE OF RANDI HILL

9/6/02

(904)276-2519

CR2E037 (4/02)