2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2012
Secretary of State

DOCUMENT# 741981

Entity Name: FOXWOOD PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O BRISTOL PROPERTY MANAGEMENT
543 NW LAKE WHITNEY PL., SUITE 101-102
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

C/O BRISTOL PROPERTY MANAGEMENT
543 NW LAKE WHITNEY PL., SUITE 101-102
PORT ST. LUCIE, FL 34986

New Mailing Address:

FEI Number: 59-2719735 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INGLIS, STEVE
BRISTOL MANAGEMENT SERVICE
1930 COMMERCE LN
JUPITER, FL 33458 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: DT
Name: NASH, SUSIE
Address: 11406 SW MEADOW LARK CIR
City-St-Zip: STUART, FL 34997

Title: DVP
Name: SCOTT, BILL
Address: 11245 SW MEADOW LARK CIR
City-St-Zip: STUART, FL 34997

Title: D
Name: KREITZ, JOE
Address: 11486 SW MEADOW LARK CIR
City-St-Zip: STUART, FL 34997

Title: DP
Name: RICE, WILSON
Address: 11365 SW MEADOW LARK CIR
City-St-Zip: STUART, FL 34997

Title: D
Name: JACQUES, JOHN
Address: 10943 SW HAWKVIEW
City-St-Zip: STUART, FL 34997

Title: D
Name: RICE, BECKY
Address: 11365 SW MEADOWLAKE CIRCLE
City-St-Zip: STUART, FL 34997

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: WILSON RICE P 04/20/2012

Electronic Signature of Signing Officer or Director — Date