

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742500

FILED
Mar 15, 2011
Secretary of State

Entity Name: FOXWOOD COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

C/O PREFERRED COMMUNITY MANAGEMENT, INC.
4962 N. PALM AVE
WINTER PARK, FL 32792 US

New Principal Place of Business:

Current Mailing Address:

C/O PREFERRED COMMUNITY MANAGEMENT, INC.
P.O. BOX 677307
ORLANDO, FL 32867

New Mailing Address:

FEI Number: 59-1914050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRASCA, JOSEPH
C/O PREFERRED COMMUNITY MANAGEMENT, INC.
4962 N. PALM AVE
WINTER PARK, FL 32792 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: VP
Name: WEISSMAN, HERBERT
Address: 2963 AUTUMNWOOD TRAIL
City-St-Zip: APOPKA, FL 32703

Title: D
Name: TORCHIA, FRANK
Address: 522 HUNT CLUB BLVD. PMB #406
City-St-Zip: APOPKA, FL 32703

Title: DT
Name: SORENSON, CINDY
Address: 2803 TAMARACK TRAIL
City-St-Zip: APOPKA, FL 32703

Title: DS
Name: HOLLAND, DIANA
Address: 3012 AUTUMWOOD TRAIL
City-St-Zip: APOPKA, FL 32703

Title: D
Name: FELTNER, SANDY
Address: 3153 FOXWOOD TRAIL
City-St-Zip: APOPKA, FL 32703

Title: DP
Name: HOLLAND, ROBERT
Address: 3012 AUTUMNWOOD TRAIL
City-St-Zip: APOPKA, FL 32703

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: JOSEPH FRASCA

MGR

03/15/2011

Electronic Signature of Signing Officer or Director

Date