2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2009
Secretary of State

DOCUMENT# 743559

Entity Name: FOXWOOD ESTATES PROPERTY OWNERS ASSOCIATION INC.

Current Principal Place of Business:

4998 ALDER DRIVE
WEST PALM BEACH, FL 33417

New Principal Place of Business:

Current Mailing Address:

4998 ALDER DRIVE
WEST PALM BEACH, FL 33417

New Mailing Address:

FEI Number: 59-2047979 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MESCHES, LARRY M PA
525 S FLAGLER DR
200
WEST PALM BEACH, FL 33401 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	( ) Delete
Name:	COOK, JAMES	
Address:	4928 D ALDER DR	
City-St-Zip:	WEST PALM BEACH, FL 33417	
Title:	P	( ) Delete
Name:	LIVELY, EUNICE	
Address:	4808-D ALDER DRIVE	
City-St-Zip:	WEST PALM BEACH, FL 33417	
Title:	BM	(X) Delete
Name:	HAIGH, WILLIAM	
Address:	4874 MARBELLA RD SOUTH	
City-St-Zip:	WEST PALM BEACH, FL 33417	
Title:	T	( ) Delete
Name:	SHAW, JOHN	
Address:	4871 MARBELLA ROAD SOUTH	
City-St-Zip:	WEST PALM BEACH, FL 33417	
Title:	BM	( ) Delete
Name:	BORDEN, NANCY	
Address:	4826 ALDER DR	
City-St-Zip:	WEST PALM BEACH, FL 33417	
Title:	S	( ) Delete
Name:	REBILLARD, CHARLOTTE	
Address:	4968 BALDER DR	
City-St-Zip:	WEST PALM BEACH, FL 33417	

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:		
Title:	S	(X) Change ( ) Addition
Name:	REBILLARD, CHARLOTTE	
Address:	4968-B ALDER DR	
City-St-Zip:	WEST PALM BEACH, FL 33417	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EUNICE LIVELY PRES 02/19/2009

Electronic Signature of Signing Officer or Director — Date