2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#743896

FILED Feb 12, 2009 Secretary of State

Entity Name: FOXMEADOW CIVIC ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 4260 SADDLEHORN TRAIL 4260 SADDLEHORN TRAIL P.O. BOX 623 MIDDLEBURG, FL 320507623 MIDDLEBURG, FL 320507623 **New Mailing Address: Current Mailing Address:** 4260 SADDLEHORN TRAIL P.O. BOX 623 MIDDLEBURG, FL 320507623 FEI Number: 59-3127228 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RICHARD, RAYMOND 1556 SURREY GLEN COVE MIDDLEBURG, FL 32068 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition RICHARD, RAYMOND Name: Name: 1556 SURREY GLEN COVE Address: Address: City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: Title: Title: () Delete () Change () Addition SUTER, DIANE Name: Name: Address: 4251 CARRIAGE CT Address: City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: Title: () Delete Title: () Change () Addition LANCLEY, LAYTON Name: Name: 4241 POWDERHORN CT Address: Address: City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: PAYNE, JEAN C Name: 4260 SADDLEHORN TRAIL Address: Address: City-St-Zip: MIDDLEBURG, FL 00000, City-St-Zip: Title: SD () Delete Title: () Change () Addition MORGAN, VIRGINIS Name: Name: 4361 SADDLEHORN TR Address: Address: City-St-Zip: MIDDLEBURG, FL City-St-Zip: Title: () Delete Title: () Change (X) Addition HINDMAN, EARL Name: Name: Address: Address: 4391 SIDEWINDER TR MIDDLEBURG, FL 32068 City-St-Zip: City-St-Zip:

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: RAYMOND RICHARD P 02/12/2009