

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747011

FILED  
Mar 19, 2010  
Secretary of State

**Entity Name:** FOXMOOR II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

7050 NANTUCKET CIRCLE N.E.  
NORTH FT MYERS, FL 33917

**New Principal Place of Business:**

GULF SHORE CAM INC.  
76 PONDELLA ROAD, SUITE 201  
NORTH FT MYERS, FL 33917

**Current Mailing Address:**

76 PONDELLA RD. STE. 201  
N FT MYERS, FL 33903 US

**New Mailing Address:**

GULF SHORE CAM INC.  
76 PONDELLA ROAD, SUITE 201  
NORTH FT MYERS, FL 33917

FEI Number: 59-2290558

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAPOSTA, RICHARD L  
C/O GULFSHORES CAM  
76 PONDELLA RD. STE. 201  
N FT MYERS, FL 33903 US

**Name and Address of New Registered Agent:**

LAPOSTA, RICHARD L  
GULFSHORES CAM INC.  
76 PONDELLA RD. STE. 201  
N FT MYERS, FL 33903 US

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: RICHARD L. LAPOSTA

03/19/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: LEBEAU, ROBERT  
Address: 7098 I5 NANTUCKET CR  
City-St-Zip: N. FORT MYERS, FL 33917

Title: DT  
Name: NELSON, MAURICE  
Address: 7104 J8 NANTUCKET CIRCLE  
City-St-Zip: N. FORT MYERS, FL 33917

Title: D  
Name: STOKLEY, DAVID  
Address: 7080 F5 NANTUCKET CIRCLE  
City-St-Zip: N. FORT MYERS, FL 33917

Title: DS  
Name: MILLER, THOMAS  
Address: 7074 E5 NANTUCKET CIRCLE  
City-St-Zip: N. FORT MYERS, FL 33917

Title: DVP  
Name: GULDAN, JAMES  
Address: 7086 G4 NANTUCKET CIRCLE  
City-St-Zip: N. FORT MYERS, FL 33917

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: ROBERT LEBEAU

DP

03/19/2010

Electronic Signature of Signing Officer or Director

Date