2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#754690

FILED Apr 03, 2011 Secretary of State

Entity Name: FOXMOOR LAKES MASTER ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

GULFSHORE COMMUNITY ASSO. MGNT 76 PONDELLA ROAD SUITE 201 N FT MYERS, FL 33903 US

Current Mailing Address: New Mailing Address:

GULFSHORE COMMUNITY ASSO. MGNT 76 PONDELLA ROAD SUITE 201 N FT MYERS, FL 33903 US

FEI Number: 59-2068748 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:

LAPOSTA, RICHARD L 76 PONDELLA RD. SUITE #201 FORT 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: L

Name: DOTY, ROGER Address: 5691 LONG LEAF DR

City-St-Zip: NORTH FORT MYERS, FL 33917

Title: D

Name: GASTAUER, BARBARA
Address: 15544 CRYSTAL LAKE DR
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: DVPT

Name: COHEN, DAVE

Address: 15461 CRYSTAL LAKE DR
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: DP

Name: MARRIOTT, JOHN Address: 5678 FOX LAKE DR

City-St-Zip: NORTH FORT MYERS, FL 33917

Title: [

Name: KIME, WILMA Address: 5591 FOX LAKE DR

City-St-Zip: NORTH FORT MYERS, FL 33917

Title: DS

Name: LIGNELL, SANDRA
Address: 15413 CRYSTAL LAKE DR
City-St-Zip: NORTH 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: JOHN MARRIOTT DP 04/03/2011