

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757281

FILED
Mar 10, 2011
Secretary of State

Entity Name: FOX CHASE WEST PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

FOX CHASE POA
2350 FOX CHASE BLVD.
PALM HARBOR, FL 34683 US

New Principal Place of Business:

QUALIFIED PROPERTY MGMT INC
5901 US HWY 19, STE 7Q
NEW PORT RICHEY, FL 34652 US

Current Mailing Address:

FOX CHASE POA
2350 FOX CHASE BLVD.
PALM HARBOR, FL 34683 US

New Mailing Address:

QUALIFIED PROPERTY MGMT INC
5901 US HWY 19, STE 7Q
NEW PORT RICHEY, FL 34652 US

FEI Number: 59-2107071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KARAGIANIS, IRENE
40347 US 19N STE 201
TARPOON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

QUALIFIED PROPERTY MGMT INC
5901 US HWY 19
STE 7Q
NEW PORT RICHEY, FL 34652 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: MARY WHITE

03/10/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: PINELLI, MATTHEW JR
Address: 2350 FOX CHASE BLVD
City-St-Zip: PALM HARBOR, FL 34683 US

Title: VP
Name: MATTY, CASTELLANO
Address: 3101 FOX CHASE BLVD
City-St-Zip: PALM HARBOR, FL 34683 US

Title: TD
Name: ELVERSON, CAROLYN
Address: 2350 FOX CHASE BLVD
City-St-Zip: PALM HARBOR, FL 34683 US

Title: SD
Name: SKIVER, MARK
Address: 2350 FOX CHASE BLVD
City-St-Zip: PALM HARBOR, FL 34683 US

Title: D
Name: CROWLEY, VICKI
Address: 2350 FOX CHASE BLVD
City-St-Zip: PALM HARBOR, FL 34683

Title: D
Name: LAMORTE, RAFAELA
Address: 2350 FOX CHASE BLVD
City-St-Zip: PALM HARBOR, FL 34686

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: PINELLI MATTHEW

PD

03/10/2011

Electronic Signature of Signing Officer or Director

Date