

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 763919

1. Entity Name

FOX VALLEY HOMEOWNERS ASSOC., INC.

Principal Place of Business

15 FOX VALLEY DRIVE
ORANGE PARK FL 32073
US

Mailing Address

15 FOX VALLEY DRIVE
ORANGE PARK FL 32073-5114
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

~~WILHITE, MARVIN E~~
~~1712 KINGSLEY AVENUE~~
~~ORANGE PARK FL 32073~~

7. Name and Address of New Registered Agent

Name JOHN F. TOLSON JR

Street Address (P.O. Box Number is Not Acceptable)

2301 PARK AVE SUITE 406

City

ORANGE PARK

FL

Zip Code
32073

8. 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

JOHN F. TOLSON JR

JOHN F. TOLSON JR

3/14/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

T ☐ Delete
TITLE
NAME RIEGEL, ROBERT
STREET ADDRESS 15 FOX VALLEY DRIVE
CITY-ST-ZIP ORANGE PARK FL 32073

D ☐ Delete
TITLE
NAME STELTER, CAROL
STREET ADDRESS 68 FOX VALLEY DR
CITY-ST-ZIP ORANGE PARK FL

PD ☐ Delete
TITLE
NAME BOYETTE, HAROLD
STREET ADDRESS 53 FOX VALLEY DRIVE
CITY-ST-ZIP ORANGE PARK FL 32073

PD ☒ Delete
TITLE
NAME BURNETTE, BEN
STREET ADDRESS 94 FOX VALLEY DR
CITY-ST-ZIP ORANGE PARK FL

D ☐ Delete
TITLE
NAME MINERVA, ROY
STREET ADDRESS 11 FOX VALLEY DR
CITY-ST-ZIP ORANGE PARK FL

D ☐ Delete
TITLE
NAME HEWITT, PAT
STREET ADDRESS 46 FOX VALLEY DRIVE
CITY-ST-ZIP ORANGE PARK FL 32073

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P ☒ Change ☒ Addition
TITLE
NAME ODEHNAL, DON
STREET ADDRESS 83 FOX VALLEY DR,
CITY-ST-ZIP ORANGE PARK, FL 32073

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ROBERT W. RIEGEL
SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Mar 17, 2000 8:00 am
Secretary of State

03-17-2000 90006 005 ****61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2489880

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

CR2E037 (9/99)