

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 16, 2001 8:00 am
Secretary of State

02-16-2001 90016 049 ****61.25

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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
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2489880

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TOLSON, JOHN F JR
462 KINGSLEY AVE., STE 101
ORANGE PARK FL 32073

Name

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

City

FL

Zip Code

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

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

☐ Change ☒ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MECKO, YVONNE
23 FOX VALLEY DR.
ORANGE PARK, FL 32073

PD
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ODEHNAL, DON
83 FOX VALLEY DR
ORANGE PARK FL 32073

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

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

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

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

☐ 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. RIEDEL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/01

Date

Daytime Phone #

904-276-3927

CR2E037 (10/00)