

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00305

FILED
Apr 22, 2009
Secretary of State

Entity Name: FOXWOOD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

561 FOXWOOD BLVD
ENGLEWOOD, FL 34223

New Principal Place of Business:

Current Mailing Address:

561 FOXWOOD BLVD
ENGLEWOOD, FL 34223

New Mailing Address:

FEI Number: 59-2377580

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARGUS PROPERTY MANANGEMENT
% FOXWOOD CONDOMINIUM ASSOCIATION
561 FOXWOOD BLVD
ENGLEWOOD, FL 34223 US

Name and Address of New Registered Agent:

COAST PROPERTY MANANGEMENT
% FOXWOOD CONDOMINIUM ASSOCIATION
561 FOXWOOD BLVD
ENGLEWOOD, FL 34223 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: FRED TORRINGTON

04/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROWN, EARL
Address: 603 APPLE
City-St-Zip: ENGLEWOOD, FL 34223

Title: VPD () Delete
Name: BREWER, NANCY
Address: 625 DOGWOOD BLVD
City-St-Zip: ENGLEWOOD, FL 34223

Title: TD () Delete
Name: SAYRE, CHARLES
Address: 634 LINDEN DR
City-St-Zip: ENGLEWOOD, FL 34223

Title: S () Delete
Name: CONNORS, ROMAINE
Address: 533 FOXWOOD BLVD
City-St-Zip: ENGLEWOOD, FL 34223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: CONNORS, ROMAINE
Address: 533 FOXWOOD BLVD.
City-St-Zip: ENGLEWOOD, FL 34223

Title: S (X) Change () Addition
Name: STENHOUSE, ANN MARIE
Address: 658 FOXWOOD BLVD
City-St-Zip: ENGLEWOOD, FL 34223

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EARL BROWN

P

04/22/2009

Electronic Signature of Signing Officer or Director

Date