# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 29, 2008 8:00 am**
**Secretary of State**
04-29-2008 90088 041 ****61.25

DOCUMENT # N01000004151

1. Entity Name
FOX RUN HOMEOWNERS ASSOCIATION OF CRAWFORDVILLE, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 57 FOX RUN CIRCLE<br>CRAWFORDVILLE, FL 32327 | 57 FOX RUN CIRCLE<br>CRAWFORDVILLE, FL 32327 |

04222008 Chg-NP CR2E037 (12/06)

| 2. Principal Place of Business - No P.O. Box # | 3. Mailing Address |
|---|---|
| 184 Fox Run Circle | 184 Fox Run Circle |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State: Crawfordville, FL | City & State: Crawfordville, FL |
| Zip: 32327 Country: Wakulla | Zip: 32327 Country: Wakulla |

4. FEI Number: 50-0002491 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

CELESTE, STEVE
57 FOX RUN CIRCLE
CRAWFORDVILLE, FL 32327

**7. Name and Address of New Registered Agent**

Name: KURT POSEY
Street Address (P.O. Box Number is Not Acceptable): 184 Fox Run Circle
City: Crawfordville FL Zip Code: 32327

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Kurt Posey 4/27/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is $61.25**
**Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

**Make check payable to Florida Department of State**

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>CASTO, JOEL<br>205 FOX RUN CIRCLE<br>CRAWFORDVILLE, FL 32327 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | DVP<br>CASTO JOEL<br>205 Fox Run Circle<br>Crawfordville, FL 32327 | ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>WATERS, KEVIN<br>69 FOX RUN CIRCLE<br>CRAWFORDVILLE, FL 32327 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | DVP<br>POSEY, KURT<br>184 FOX RUN CIRCLE<br>CRAWFORDVILLE, FL 32327 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | DP<br>POSEY KURT<br>184 Fox Run Circle<br>Crawfordville, FL 32327 | ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | DP<br>CELESTE, STEVE<br>57 FOX RUN CIRCLE<br>CRAWFORDVILLE, FL 32327 | ☑ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>HAMPTON JUDY<br>187 Fox Run Circle<br>Crawfordville, FL 32327 | ☐ Change ☑ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D/S<br>RUTLEDGE, SEASHA<br>184 FOX RUN CIRCLE<br>CRAWFORDVILLE, FL 32327 | ☑ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | DS<br>CROSS JUSTIN<br>8 Fox Run Circle<br>Crawfordville, FL 32327 | ☐ Change ☑ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D/T<br>SMITH, CAROLYN<br>90 FOX RUN CIRCLE<br>CRAWFORDVILLE, FL 32327 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** Kurt Posey Kurt Posey 4/27/08 8509262024
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #