

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006835

FILED
Jul 08, 2006
Secretary of State

Entity Name: FOX LAKE FARMS, INC.

Current Principal Place of Business:

3773 FOX LAKE RD
TITUSVILLE, FL 327964023

New Principal Place of Business:

Current Mailing Address:

3773 FOX LAKE RD
TITUSVILLE, FL 327964023

New Mailing Address:

FEI Number: 22-3868137 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

UNCAPHER, KENNETH R
228 HILLCREST ST
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MOYE, GLORIA J
Address: 3773 FOX LAKE RD
City-St-Zip: TITUSVILLE, FL 327964023

Title: D () Delete
Name: MOYE, JAMES E
Address: 3773 FOX LAKE RD
City-St-Zip: TITUSVILLE, FL 327964023

Title: D () Delete
Name: WINSLOW, JEAN T
Address: 3773 FOX LAKE RD
City-St-Zip: TITUSVILLE, FL 327964023

Title: D () Delete
Name: CHAPMAN, JILL
Address: 971 WILD PINE RD.
City-St-Zip: MIMS, FL 32754

Title: D () Delete
Name: TYLER, JUDY G
Address: 3773 FOX LAKE RD
City-St-Zip: TITUSVILLE, FL 327964023

Title: D () Delete
Name: MOYE, JAMES DOUGLAS
Address: 3773 FOX LAKE RD
City-St-Zip: TITUSVILLE, FL 327964023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: GLORIA MOYE

D

07/08/2006

Electronic Signature of Signing Officer or Director

Date