

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02653

FILED
Apr 28, 2006
Secretary of State

Entity Name: FOXBOROUGH TOWNHOUSE ASSOCIATION, INC.

Current Principal Place of Business:

1316 FOXBOROUGH DRIVE
P. O. BOX 15067
PENSACOLA, FL 32514

New Principal Place of Business:

1322 FOXBOROUGH DRIVE
P. O. BOX 15067
PENSACOLA, FL 32514

Current Mailing Address:

1316 FOXBOROUGH DRIVE
P. O. BOX 15067
PENSACOLA, FL 32514

New Mailing Address:

1322 FOXBOROUGH DRIVE
P. O. BOX 15067
PENSACOLA, FL 32514

FEI Number: 59-2460587

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SYOBODA, PAULA
1316 FOXBOROUGH DRIVE
PENSACOLA, FL 32514 US

Name and Address of New Registered Agent:

RUTTAN, AL
1322 FOXBOROUGH DRIVE
PENSACOLA, FL 32514 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: AL RUTTAN

04/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: GANEY, CATHY
Address: 1315 FOXBOROUGH DR
City-St-Zip: PENSACOLA, FL 32514

Title: PD () Delete
Name: SVOBODA, PAULA
Address: 1316 FOXBOROUGH DR
City-St-Zip: PENSACOLA, FL

Title: VPD () Delete
Name: RUTTAN, AL
Address: 1322 FOXBOROUGH DR
City-St-Zip: PENSACOLA, FL 32514

Title: D () Delete
Name: SCHUSTER, CLARA
Address: 1320 FOXBOROUGH DR
City-St-Zip: PENSACOLA, FL 32514

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: RUTTAN, AL
Address: 1322 FOXBOROUGH DR
City-St-Zip: PENSACOLA, FL

Title: VPD (X) Change () Addition
Name: SCHUSTER, CLARA
Address: 1320 FOXBOROUGH DR
City-St-Zip: PENSACOLA, FL 32514

Title: D (X) Change () Addition
Name: BECK, RICK
Address: 9714 HOLLOWBROOK DR
City-St-Zip: PENSACOLA, FL 32514

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: AL RUTTAN

PD

04/28/2006

Electronic Signature of Signing Officer or Director

Date