

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 02, 2006 8:00 am**  
**Secretary of State**

05-02-2006 90216 047 \*\*\*\*61.25

**DOCUMENT # N03521**

1. Entity Name

**FOX CHASE WEST CONDOMINIUM NO. 5 ASSOCIATION, INC.**



Principal Place of Business

**40347 US 19 NORTH  
STE201  
TARPON SPRINGS FL 34689  
US**

Mailing Address

**PO BOX 695  
TARPON SPRINGS FL 34689  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-2534093**

Applied For

Not Applicable

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

**KARAGIANIS, IRENE  
40347 US 19 N STE 201  
TARPON SPRINGS FL 34689**

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

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  
Due By May 1, 2006**

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

TITLE PD ☐ Delete  
NAME AUSTIN, RUTH  
STREET ADDRESS 3277 FOX CHASE CIR. N #205  
CITY-ST-ZIP PALM HARBOR FL 34683

TITLE VP ☐ Delete  
NAME LEVEY, ANTOINETTE  
STREET ADDRESS 3277 FOX CHASE BLVD, # 202  
CITY-ST-ZIP PALM HARBOR FL 34683

TITLE ~~TD~~ ☒ Delete  
NAME BUCK, NICOLE  
STREET ADDRESS 3277 FOX CHASE CIR N #203  
CITY-ST-ZIP PALM HARBOR FL 34683

TITLE ~~STD~~ ☒ Delete  
NAME JOHNSON, CLIFFORD  
STREET ADDRESS 3277 FOX CHASE BLVD, # 107  
CITY-ST-ZIP PALM HARBOR FL 34683

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ~~Treas.~~ ☐ Change ☒ Addition  
NAME CURRY, NATASHA  
STREET ADDRESS 3277 Fox chase BLVD. N #111  
CITY-ST-ZIP PALM Harbor FL. 34683

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

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Ruth E Austin* **Ruth E Austin** 4-20-06