

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03521

FILED
Apr 20, 2008
Secretary of State

Entity Name: FOX CHASE WEST CONDOMINIUM NO. 5 ASSOCIATION, INC.

Current Principal Place of Business:

11922 TEE TIME CIRCLE
NEW PORT RICHEY, FL 34654 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 146
PORT RICHEY, FL 34654 US

New Mailing Address:

FEI Number: 59-2534093

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPROWLS, JOSEPH
11922 TEE TIME CIRCLE
NEW PORT RICHEY, FL 34654 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: PD () Delete
Name: AUSTIN, RUTH
Address: 3277 FOX CHASE CIR. N #205
City-St-Zip: PALM HARBOR, FL 34683

Title: VP () Delete
Name: LEVEY, ANTOINETTE
Address: 3277 FOX CHASE BLVD. # 202
City-St-Zip: PALM HARBOR, FL 34683

Title: T () Delete
Name: CURRY, NATASHA
Address: 3277 FOX CHASE BLVD. N #111
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T/D (X) Change () Addition
Name: LEVEY, ANTOINETTE
Address: 3277 FOX CHASE BLVD. # 202
City-St-Zip: PALM HARBOR, FL 34683

Title: S/D (X) Change () Addition
Name: CUEVAS, SHARON
Address: 3277 FOX CHASE BLVD. N #105
City-St-Zip: PALM HARBOR, FL 34683

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: RUTH AUSTIN

PRES

04/20/2008

Electronic Signature of Signing Officer or Director

Date