2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07789

FILED Feb 18, 2004 Secretary of State

Entity Name: FOXFIRE VILLAS I HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: C/O NEWELL PROPERTY MANAGEMENT 5435 JAEGER RD. #4 NAPLES FL 34109 **New Mailing Address: Current Mailing Address:** C/O NEWELL PROPERTY MANAGEMENT 5435 JAEGER RD. #4 NAPLES, FL 34109 FEI Number: 59-2641353 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NEWELL, WILLIAM 5435 JAEGAR RD #4 NAPLES, FL 34109 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition DISBROWE, GEORGE CONSTANCE, PAPPAS Name: Name: 754 KINGS WAY Address: 856 KINGS WAY Address: City-St-Zip: NAPLES, FL 34184 City-St-Zip: NAPLES, FL 34104 Title: STD Title: () Delete () Change () Addition Name: LANGE, LOIS Name: Address: 902 KINGS WAY Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: Title: () Delete Title: () Change () Addition GIBELEY, ROBERT Name: Name: Address: 656 KINGS WAY Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: (X) Change () Addition Title: PD () Delete Title: PAPPAS, CONSTANCE Name: Name: EKBERG, KEN 856 KINGS WAY Address: Address: 754 KINGS WAY City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34104 Title: () Delete Title: () Change () Addition VINCENT, WILLIAM Name: Name: 950 KINGS WAY Address: Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CONSTANCE PAPPAS PD 02/18/2004