## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N12864

FILED Mar 30, 2010 Secretary of State

Entity Name: FOXFIRE VILLAS II 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 US

Current Mailing Address: New Mailing Address:

C/O NEWELL PROPERTY MANAGEMENT 5435 JAEGER RD. #4 NAPLES, FL 34109 US

FEI Number: 59-2783809 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 JAEGER 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:**

Title: PD

Name: MILLS, PETER
Address: 136 FOXGLEN DRIVE
City-St-Zip: NAPLES, FL 34104

Title: SD

Name: HAVARD, BETTY
Address: 107 FOXGLEN DRIVE
City-St-Zip: NAPLES, FL 34104

Title:

Name: KAVANAGH, BERNARD Address: 119 FOXGLEN DRIVE City-St-Zip: NAPLES, FL 34104

Title:

Name: FREDELL, GARY
Address: 121 FOXGLEN DRIVE
City-St-Zip: NAPLES, FL 34104

Title: TD

Name: HEIER, JEFFREY
Address: 162 FOXGLEN DRIVE
City-St-Zip: NAPLES, FL 34104

I hereby 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 all other like empowered.

SIGNATURE: PETER MILLS PD 03/30/2010