2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State

DOCUMENT# N13480

Entity Name: THE VILLAGE AT FOXWOOD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1122 AYRSHIRE STREET
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 350279
PALM COAST, FL 32135 US

New Mailing Address:

FEI Number: 59-2907771 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAREY, JUDI
1122 AYRSHIRE STREET
ORLANDO, FL 32803 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: VPD
Name: STEINKE, JAMES
Address: PO BOX 350279
City-St-Zip: PALM COAST, FL 32135

Title: D
Name: MARIANI, JOANNE
Address: PO BOX 350279
City-St-Zip: PALM COAST, FL 32135

Title: TD
Name: DUCKWORTH, DAVID
Address: PO BOX 350279
City-St-Zip: PALM COAST, FL 32135

Title: SD
Name: CAPPONI, HOLLY
Address: PO BOX 350279
City-St-Zip: PALM COAST, FL 32135

Title: PD
Name: STEINKE, GIL
Address: PO BOX 350279
City-St-Zip: PALM COAST, FL 32135

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: JUDI CAREY MS. 04/28/2011

Electronic Signature of Signing Officer or Director Date