

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18657

FILED  
Apr 14, 2011  
Secretary of State

**Entity Name:** FOX CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O RESORT MGMT  
2685 HORSESHOE DR S #215  
NAPLES, FL 34104 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O RESORT MGMT  
2685 HORSESHOE DR S #215  
NAPLES, FL 34104 US

**New Mailing Address:**

**FEI Number:** 65-0013336

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HERSHBERGER, DANIEL  
191 FOXGLEN DR  
NAPLES, FL 34104 US

**Name and Address of New Registered Agent:**

LAW OFFICE OF JAMIE GREUSEL  
1104 N. COLLIER BLVD  
MARCO ISLAND, FL 34145 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: JAMIE GREUSEL

04/14/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: CLEMENTS, RICHARD  
Address: 215 FOXGLEN DRIVE  
City-St-Zip: NAPLES, FL 34104

Title: S  
Name: HESS, DOTTIE  
Address: 193 FOXGLEN DRIVE  
City-St-Zip: NAPLES, FL 34104

Title: D  
Name: BRZEZINSKI, ROBERT  
Address: 504 DURNHAM  
City-St-Zip: WATERFORD, MI 48327

Title: T  
Name: REED, JOE  
Address: 205 FOXGLEN DRIVE  
City-St-Zip: NAPLES, FL 34104

Title: P  
Name: HERSBERGER, DANIEL  
Address: 191 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: DANIEL HERSBERGER

P

04/14/2011

Electronic Signature of Signing Officer or Director

Date