2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **N36437**



FILED Aug 26, 2003 8:00 am Secretary of State

1. Entity Name FOXBORO HOMEOWNERS ASSOCIATION, INC.					08-26	5-2003 90023	040 ****61.2	25	
8841 141ST DE LIVE OAK FL S US	32060	Mailing Address 8841 141ST DRIVE LIVE OAK FL 32060 US	-		l rádialta agg chill a	 	ii 81811 61811 81811 618	IM 84811 (8 8 1	
2. Principal Place of Business 3. Mailing Address 922249 Suite, Apt. #, etc. Suite, Apt. #, etc.			SI ORIV	e	CHECK HERE IF MAKING CHANGES				
City & Stat	e Oric, FL	City & State Live OAK	FL	4.	FEI Number 59-2	987128		pplied For ot Applicable	
3200	Country USA	32060 Registered Agent	Country US/	/	Certificate of Status		\$8.75 Ad Fee Require		
	6. Name and Address of Current F	Registered Agent	Name	7.	Name and Address	2111			
JAMIE C. DEBONO			<u>\</u>	Street Address (P.O. Box Number is Not Acceptable)					
8841 141ST DRIVE							مبحو جه		
LIVE OAK PL 32000				9272 14/SI DRIVE					
8. The above named entity submits this statement for the purpose of changing its registered office or regis					AK	<u> </u>	「┗ <i>≾⋧</i> の	60	
	named entity submits this statement for tions of registered agent.	the purpose of changing its	registered office o	r registered aç	gent, or both, in the	State of Florida. I	am familiar with,	and accept	
	Ilmi. Da	The second	an in a ci	·-		8-	27-0	2	
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE	: Registered Agent signa	ture required when r	einstating)	. DA	ATE		
	FILE NOW: FEE IS \$61.25 tember 10, 2003, min will be \$23	•	npaign Financing ontribution.		00 May Be ed to Fees		neck Payable partment of		
After Sept	tember 10, 2003, min will be \$23	36.25 Trust Fund Co	ontribution.	Add		Florida De	DIRECTORS IN	State	
After Sept	tember 10, 2003, min will be \$23	36.25 Trust Fund Co	ontribution.	ADDI	TIONS/CHANGES T	Florida De	partment of	State	
10. TITLE: NAME STREET ADDRESS	OFFICERS AND DIR VD LEE, GEORGE RT 6 FOXBORO SUBDIVISION	36.25 Trust Fund Co	11. TITLE NAME STREET ADDRESS	ADDI WILLIA 9272	FIONS/CHANGES TO R. STE	Florida De	D DIRECTORS IN Change	State	
After Sept 10. TITLES STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIR VD LEE, GEORGE RT 6 FOXBORO SUBDIVISION LIVE OAK FL	Trust Fund Co	Ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDI Willia 9272 Live	TIONS/CHANGES T	Florida De	D DIRECTORS IN Change	State 4,10 Addition	
10. TITLE: NAME STREET ADDRESS	OFFICERS AND DIR VD LEE, GEORGE RT 6 FOXBORO SUBDIVISION LIVE OAK FL SD FLETCHER, DEE DEE	36.25 Trust Fund Co	11. TITLE NAME STREET ADDRESS	ADDITUTE STATE STA	FIONS/CHANGES TO RESTORATE TO THE PARK, FOR	Florida De	D DIRECTORS IN Change	State	
After Sept 10. TITLE: NAME: STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIR VD LEE, GEORGE RT 6 FOXBORO SUBDIVISION LIVE OAK FL SD FLETCHER, DEE DEE 9043 141ST DRIVE	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Addi PWILLIF 9272 Live S FLETC 9043	FIONS/CHANGES TO RESTORATE TO STREET	Florida De O OFFICERS AND ORIVE 3206	DIRECTORS IN Change	State 4,10 Addition	
After Sept 10. TITLE: NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIR VD LEE, GEORGE RT 6 FOXBORO SUBDIVISION LIVE OAK FL SD FLETCHER, DEE DEE	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Addi PWILLIF 9272 Live S FLETC 9043	FIONS/CHANGES TO RESTORATE TO THE PARK, FOR	Florida De O OFFICERS AND ORIVE 3206	DIRECTORS IN Change	State J.10 Addition Addition	
10. TITLES	OFFICERS AND DIR VD LEE, GEORGE RT 6 FOXBORO SUBDIVISION LIVE OAK FL SD FLETCHER, DEE DEE 9043 141ST DRIVE LIVE OAK FL D MURPHY, ROBERT	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Addi PWILLIF 9272 Live S FLETC 9043	FIONS/CHANGES TO RESTORATE TO STREET	Florida De O OFFICERS AND ORIVE 3206	DIRECTORS IN Change	State 4,10 Addition	
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indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE