

**2002 UNIFORM BUSINESS REPORT (UBR)**

4/9

**FILED**  
**May 21, 2002 8:00 am**  
**Secretary of State**

04-09-2002 90063 041 \*\*\*\*61.25

**STATEMENT # N37351**  
 1. Entity Name  
**FOXMOOR OF FOXFIRE COMMONS ASSOCIATION, INC.**

Principal Place of Business      Mailing Address  
 1100 5TH AVE. S.      1100 5TH AVE. S.  
 SUITE 201      SUITE 201  
 NAPLES FL 33940      NAPLES FL 33940  
 US      US

2. Principal Place of Business      3. Mailing Address  
 5730 Zane S.W.      P.O. Box 7335  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State  
 Naples, FL      Naples, FL  
 Zip      Country      Zip      Country  
 34116      Collier      34101      Collier

4. FEI Number      Applied For  
 59-2452621      Not Applicable

5. Certificate of Status Desired      \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
**ROBERT HALL & ASSOCIATES INC.**  
 1100 5TH AVE. S. #201  
 NAPLES FL 33940

7. Name and Address of New Registered Agent  
 Name **Alan mark Krinsky**  
 Street Address (P.O. Box Number is Not Acceptable)  
 5730 Zane SW  
 City **Naples**      FL      Zip Code **34116**

B. 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: *[Signature]*      DATE: **3/30/02**

9. Election Campaign Financing Trust Fund Contribution.      \$5.00 May Be Added to Fees      Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	CONEGLIO, JOE	
STREET ADDRESS	1001 FOXFIRE LANE #107	
CITY-ST-ZIP	NAPLES FL 34104	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	LEWIS, RITA	
STREET ADDRESS	1001 FOXFIRE LANE #201	
CITY-ST-ZIP	NAPLES FL 34104	
TITLE	STD	<input type="checkbox"/> Delete
NAME	MCINTOSH, FRAN	
STREET ADDRESS	1051 FOXFIRE LANE #204	
CITY-ST-ZIP	NAPLES FL 34104	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

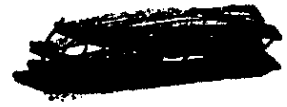
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mrs Marian Giannetti	
STREET ADDRESS	1025 Foxfire Lane #302	
CITY-ST-ZIP	Naples FL 34104	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Treasurer	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Mr Floyd Wherlin	
STREET ADDRESS	1075 Foxfire Lane #203	
CITY-ST-ZIP	Naples FL 34104	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *[Signature]*      DATE: **3/21/02**      DAYTIME PHONE #: **941-353-5545**

CP2E037 (9/01)

Attachment 08417  
Doc. # N37351



Dear Sir or Madam:

Please change the mailing address for Foxmoor III to the following:

*Commons*  
Foxmoor of ~~Foxmoor~~ *Commons* III Assoc. Inc.  
C/O Krinsky Property Management  
P.O. Box 7335  
Naples, FL 34101

If you should have any questions regarding this change, please contact Krinsky Property Management at 941-353-9945.