

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 29, 2007 8:00 am**  
**Secretary of State**

01-29-2007 90062 032 \*\*\*\*61.25

<b>DOCUMENT # N41468</b> 1. Entity Name FOXWOOD VILLAGE ASSOCIATION, INC.					
Principal Place of Business 4700 FOXWOOD BLVD LAKE LAND, FL 33810 US			Mailing Address 4700 FOXWOOD BLVD BOX AA LAKE LAND, FL 33810 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3047294	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
HAAS, TERRY 1528 VALIENT DR LAKE LAND, FL 33810				Name <b>GEORGE F. TOWER</b> Street Address (P.O. Box Number is Not Acceptable) <b>1502 HEATHER HILL DR.</b> City <b>LAKE LAND</b> <b>FL</b> Zip Code <b>33810</b>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <b>GEORGE F. TOWER PRESIDENT</b> <i>George F. Tower</i> 1/16/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when posting) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TOWER, GEORGE 1502 HEATHER HILL DR LAKE LAND, FL 33810	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STRADER, BOB 1591 VALIENT DR LAKE LAND, FL 33810	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JACKSON, RICHARD 1611 GALLAHAD DR LAKE LAND, FL 33810	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HAAS, TERRY 1528 VALIENT DR LAKE LAND, FL 33810	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MICHUDA, MIKE 1574 GARRISON DR LAKE LAND, FL 33810	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, CONNIE 1577 BLACK FOREST DR LAKE LAND, FL 33810	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LARRY DRAGON 1624 CUTTER LN. LAKE LAND FL. 33810	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. EDITH CUSTER 1617 WALKING HORSE DR. LAKE LAND, FL. 33810	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <b>GEORGE F. TOWER</b> <i>George F. Tower</i> 1/16/07 863-8160921 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					