2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED DOCUMENT # N44238 Feb 15, 2007 08:00 AN 1. Entity Name **Secretary of State** FOXES TAIL PROPERTY OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 520 FOX RUN SW 520 FOX RUN SW VERO BEACH FL 32962 VERO BEACH FL 32962 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 65-0280930 Not Applicable Zip Country Zip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BUCKLE, EDGAR V Street Address (P.O. Box Number is Not Acceptable) 520 FOX RUN SW VERO BEACH FL 32962 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE, Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS ☐ Delele THILE ■ Addition 1011 PD NAME NAME MARKS, ROBERT B U00000637666 26/07-80070-016 61.25 STREET ADDRESS 565 ROX RUN SW STREET ADDRESS CHY-ST-ZIP CHY-ST- AP VERO BEACH FL ☐ Change Addition TITLE ☐ Delete THU NAME NAME BERKLEY, SUSAN . STRUET ADDRESS 570 FOX RUN SW STREET ADDRESS CHY-S1-7IP CHY-S1-7IP VERO BEACH FL Change Addition THEF ☐ Delete NAME NAME BUCKLE, EDGAR V STREET ADDRESS STREET ADDRESS 520 FOX RUN SW CITY-ST-7IP CHY-ST-7P VERO BEACH FL Delete Change ☐ Addition VPD NAME NAME GODERSTAN, ROY STREET ADDRESS STREET ADDRESS 545 FOX RUN SW CITY-ST-7IP CITY-ST-7/P VERO BEACH FL 32962 ☐ Delete Change Addition NAM STREET ADDRESS STREET ADDRESS CUY-SI-7IP CHY-ST-7P THE ☐ Delete □ Change Addition NAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CHY-ST-7IP 12. I heroby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 logal effect as if made under eath; 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: LOGARY BUCKES TREAS 2/9/07 774-770-22