

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50979

FILED
Mar 16, 2009
Secretary of State

Entity Name: FOXTREE EAST PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6501 FOX TREE LANE
LAKELAND, FL 33813 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1771
HIGHLAND CITY, FL 338461771

New Mailing Address:

FEI Number: 59-3169944 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRIGHT, ERIC
6501 FOXTREE LANE
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRIGHT, ERIC
Address: 6501 FOX TREE LANE
City-St-Zip: LAKELAND, FL 33813 US

Title: ST () Delete
Name: ANDERSON, LOUISE
Address: 6573 FOX TREE LANE
City-St-Zip: LAKELAND, FL 33813 US

Title: VP () Delete
Name: REEVES, ROSEMARY
Address: 6544 FOX TREE LN
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: RIFFE, DEBORAH
Address: 6585 FOX TREE LN
City-St-Zip: LAKELAND, FL 33813

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LOUISE ANDERSON

ST

03/16/2009

Electronic Signature of Signing Officer or Director

_____ Date