2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Mar 31, 2008 8:00 am **Secretary of State**

03-31-2008 90001 037 ****61.25

	•	
		_
D(OCUMENT # N9700001994	



FOX PROPERTY OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 2200 NW 2 AVENUE SUITE 220 2200 NW 2 AVENUE SUITE 220 BOCA RATON, FL 33431 BOCA RATON, FL 33431 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01302008 Chg-NP CR2E037 (12/06) 4. FEI Number 65-0746549 Applied For City & State City & State Not Applicable Country Country Zip \$8.75 Additional Zip__ 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HEISE, MARTIN P Street Address (P.O. Box Number is Not Acceptable) 2200 NW 2 AVENUE SUITE 220 BOCA RATON, FL 33431 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. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee Is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1, 2008 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. President/Secretary PTD Delete TITLE Change TITLE Math P. Heise 2200 NW 2 Ave. Ste 220 MEYER, WILLIAM A NAME NAME STREET ADDRESS STREET ADDRESS 1601 BELVEDERE RD STE 407 SOUTH Boca Raton, FL 33431 CITY-ST-ZIP WEST PALM BEACH, FL 33407 CITY-ST-ZIP Vice President Change Addition VSD **⊠** Delete TITLE TITLE Eric Pamblanco TENDRICH, STEVEN A NAME 7100 W. CAMINO Real, Ste 300 STREET ADDRESS 1601 BELVEDERE RD STE 407 SOUTH STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33407 CITY-ST-ZIP TITLE ☐ Addition D Detete TITLE RICKSEN, BARBARA NAME NAME 1601 BELVEDERE RD STE 407 SOUTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33407 CITY-ST-ZIP Detete ☐ Change ☐ Addition TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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: Z

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR