2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# N98000004307

Entity Name: FOX RUN HOMEOWNERS' ASSOCIATION OF HILLSBOROUGH INC.

Current Principal Place of Business:

P.O. BOX 1619
LUTZ, FL 335481619

New Principal Place of Business:

2433 FOX FOREST DRIVE
LUTZ, FL 33549

Current Mailing Address:

P.O. BOX 1619
LUTZ, FL 335481619

New Mailing Address:

2433 FOX FOREST DRIVE
LUTZ, FL 33549

FEI Number: 59-3597251 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAUER, RITA
2433 FOX FOREST DR
LUTZ, FL 33549 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: LEDDA, FRANK
Address: 2435 FOX FOREST DRIVE
City-St-Zip: LUTZ, FL 33549

Title: VD ( ) Delete
Name: SCHMIDT, DAVID
Address: 2421 FOX FOREST DRIVE
City-St-Zip: LUTZ, FL 33549

Title: STD ( ) Delete
Name: BAUER, RITA
Address: 2433 FOX FOREST DRIVE
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: SCHMIDT, DAVID
Address: 2421 FOX FOREST DRIVE
City-St-Zip: LUTZ, FL 33549

Title: S/T (X) Change ( ) Addition
Name: BAUER, RITA
Address: 2433 FOX FOREST DRIVE
City-St-Zip: LUTZ, FL 33549

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: FRANK LEDDA PRES 04/21/2009

Electronic Signature of Signing Officer or Director — Date