2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2024
Secretary of State
5316228222CC

DOCUMENT# 763919

Entity Name: FOX VALLEY HOMEOWNERS ASSOC., INC.

Current Principal Place of Business:

48 FOX VALLEY DRIVE
ORANGE PARK, FL 32073

Current Mailing Address:

P O BOX 386
ORANGE PARK, FL 32067 US

FEI Number: 59-2489880

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GROSS, MICHAEL
48 FOX VALLEY DRIVE
ORANGE PARK, FL 32073 US

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: MICHAEL GROSS 04/18/2024

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	P/D
Name	STAMPS, TONY R
Address	62 FOX VALLEY DR
City-State-Zip:	ORANGE PARK FL 32073

Title	VP/D
Name	TERRY, MICHAEL J
Address	5 FOX VALLEY DR
City-State-Zip:	ORANGE PARK FL 32073

Title	TREASURER
Name	GROSS, MICHAEL
Address	48 FOX VALLEY DRIVE
City-State-Zip:	ORANGE PARK FL 32073

Title	SECRETARY
Name	ULRICH, NANCY CHAPMAN
Address	61 FOX VALLEY DRIVE
City-State-Zip:	ORANGE PARK FL 32073

Title	DIRECTOR
Name	HANSON, HEIDI
Address	12 FOX VALLEY DRIVE
City-State-Zip:	ORANGE PARK FL 32073

Title	DIRECTOR
Name	SUMMERTON-GROSS, NICOLLE
Address	48 FOX VALLEY DRIVE
City-State-Zip:	ORANGE PARK FL 32073

Title	DIRECTOR
Name	SMITH, DAN
Address	88 FOX VALLEY DRIVE
City-State-Zip:	ORANGE PARK FL 32073

Title	DIRECTOR
Name	BURNS, ANN
Address	71 FOX VALLEY DRIVE
City-State-Zip:	ORANGE PARK FL 32073

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I hereby 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 all other like empowered.

SIGNATURE: MICHAEL GROSS TREASURER 04/18/2024

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SMITH, MARY
Address	88 FOX VALLEY DRIVE
City-State-Zip:	ORANGE PARK FL 32073