2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2020
Secretary of State
4026219032CC

DOCUMENT# 763919

Entity Name: FOX VALLEY HOMEOWNERS ASSOC., INC.

Current Principal Place of Business:

94 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: No

Name and Address of Current Registered Agent:

MAFFETT, DAWNA
94 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: DAWNA MAFFETT 04/19/2020

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	P/D
Name	TREAT, HOMER
Address	45 FOX VALLEY DR
City-State-Zip:	ORANGE PARK FL 32073

Title	VP/D
Name	YOUNG, GERALD
Address	70 FOX VALLEY DR
City-State-Zip:	ORANGE PARK FL 32073

Title	TREASURER
Name	MAFFETT, DAWNA
Address	94 FOX VALLEY DRIVE
City-State-Zip:	ORANGE PARK FL 32073

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

Title	DIRECTOR
Name	TERRY, DEBORAH
Address	5 FOX VALLEY DRIVE
City-State-Zip:	ORANGE PARK FL 32073

Title	DIRECTOR
Name	MAFFETT, JOHN
Address	94 FOX VALLEY DRIVE
City-State-Zip:	ORANGE PARK FL 32073

Title	DIRECTOR
Name	TRYER, TERRY
Address	44 FOX VALLEY DRIVE
City-State-Zip:	ORANGE PARK FL 32073

Title	DIRECTOR
Name	WITT, DENNIS
Address	79 FOX VALLEY DRIVE
City-State-Zip:	ORANGE PARK FL 32073

Continues on page 2

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: DAWNA MAFFETT TREASURER, FVHOA 04/19/2020

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	BONNA, SANDRA
Address	75 FOX VALLEY DRIVE
City-State-Zip:	ORANGE PARK FL 32073