

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01729

Entity Name: FOX HOLLOW CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**5435 JAEGER ROAD
#4
NAPLES, FL 34109**Current Mailing Address:**5435 JAEGER ROAD
#4
NAPLES, FL 34109 US**FEI Number:** 59-2589583**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NEWELL PROPERTY MANAGEMENT CORPORATION
5435 JAEGER RD, #4
NAPLES, FL 34109 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:** ANTONIOS KOKKINOS

04/17/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CALLANAN, CHAD
Address 5463 FOX HOLLOW DRIVE
City-State-Zip: NAPLES FL 34104

Title VP, TREASURER
Name BERGER, DAVID
Address 5335 FOX HOLLOW DRIVE
City-State-Zip: NAPLES FL 34104

Title SECRETARY
Name MCANDREWS, BRUCE
Address 5415 FOX HOLLOW DRIVE
City-State-Zip: NAPLES FL 34104

Title DIRECTOR
Name WELLS, HERBERT
Address 5339 FOX HOLLOW DRIVE
City-State-Zip: NAPLES FL 34104

Title DIRECTOR
Name DIXON, ROBERT
Address 5364 FOX HOLLOW DRIVE
City-State-Zip: NAPLES FL 34104

Title DIRECTOR
Name HOLCOMB, DAVID
Address 5250 FOX HOLLOW DRIVE
 #506
City-State-Zip: NAPLES FL 34104

Title DIRECTOR
Name CAMPBELL, MARCIA
Address 5446 FOX HOLLOW DRIVE
City-State-Zip: NAPLES FL 34104

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: CHAD CALLANAN

PRESIDENT

04/17/2017

Electronic Signature of Signing Officer/Director Detail

Date