

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02478

Entity Name: FOXMOOR OF FOXFIRE CONDOMINIUM IV ASSOCIATION, INC.

Current Principal Place of Business:

C/O RESORT MANAGEMENT
2685 HORSESHOE DR #215
NAPLES, FL 34104

Current Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DR #215
NAPLES, FL 34104 US

FEI Number: 59-2460175

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAW OFFICE OF JAMIE GREUSEL
1104 N. COLLIER BLVD
MARCO ISLAND, FL 34145 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title S
Name GLATTE, PETER
Address 1075 FOXFIRE LN #304
City-State-Zip: NAPLES FL 34104

Title DIRECTOR
Name DUNLOP, THOMAS
Address 3161 COTTONWOOD BEND #1203
City-State-Zip: FORT MYERS FL 33905

Title P, / TREASURER
Name WEHRLIN, FLOYD
Address 1075 FOXFIRE LANE #203
City-State-Zip: NAPLES FL 34104

Title D
Name VAUGHN, JOHN
Address 1075 FOXFIRE LANE #305
City-State-Zip: NAPLES FL 34116

Title VP
Name STEWART, LAWRENCE E
Address 3 WILDWING PARK
City-State-Zip: CATSKILL NY 12414

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: FLOYD WEHRLIN

PRESIDENT

03/28/2013

Electronic Signature of Signing Officer/Director Detail

Date