

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07789

Entity Name: FOXFIRE VILLAS I HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O NEWELL PROPERTY MANAGEMENT
5435 JAEGER RD. #4
NAPLES, FL 34109

FILED
Feb 29, 2016
Secretary of State
CC4098784438

Current Mailing Address:

C/O NEWELL PROPERTY MANAGEMENT
5435 JAEGER RD. #4
NAPLES, FL 34109 US

FEI Number: 59-2641353

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

02/29/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name PAPPAS, CONSTANCE
Address 856 KINGS WAY
City-State-Zip: NAPLES FL 34104

Title VD
Name LANGE, DEAN
Address 902 KINGS WAY
City-State-Zip: NAPLES FL 34104

Title D
Name HOAG, DOUG
Address 430 KINGS WAY
City-State-Zip: NAPLES FL 34104

Title D
Name MCGARRY, GUY
Address 660 KINGS WAY
City-State-Zip: NAPLES FL 34104

Title SECRETARY, TREASURER,
DIRECTOR
Name GIBELEY, ROBERT
Address 656 KINGS WAY
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: CONSTANCE PAPPAS

PRESIDENT

02/29/2016

Electronic Signature of Signing Officer/Director Detail

Date