

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000011415

**Entity Name:** FOX RIVER FOUNDATION, INC.

**Current Principal Place of Business:**

13846 ATLANTIC BLVD  
APT 911  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

13846 ATLANTIC BLVD  
APT 911  
JACKSONVILLE, FL 32225 US

**FEI Number:** 84-3575485

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WALL, DUNCAN  
822 A1A N  
STE 310  
PONTE VEDRA BEACH, FL 32082 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            DIR  
Name            WALL, DUNCAN S  
Address        13846 ATLANTIC BLVD  
                  APT 911  
City-State-Zip: JACKSONVILLE FL 32225

Title            DIR  
Name            WALL, DUNCAN S  
Address        13846 ATLANTIC BLVD  
                  APT 911  
City-State-Zip: JACKSONVILLE FL 32225

Title            DIR  
Name            TARABISHI, MANAR  
Address        12898 KELSEY ISLAND DRIVE  
City-State-Zip: JACKSONVILLE FL 32224

*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:** DUNCAN S. WALL

**DIRECTOR**

**01/09/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date