

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 706831 (5)  
1. Corporation Name  
FOUNTAINHEAD ASSOCIATION, INC.



Principal Place of Business: 3900 OCEAN DRIVE LAUDERDALE BY THE SEA FL 33308  
Mailing Address: 3900 OCEAN DRIVE LAUDERDALE BY THE SEA FL 33308

3. Date Incorporated or Qualified: 02/14/1964  
3a. Date of Last Report: 04/21/1995  
4. FEI Number: 13-2524871  
Applied For: Not Applicable  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21, 22, 23, 24  
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent  
WILLIAMS, JERRY  
3900 OCEAN DRIVE  
LAUD BY THE SEA FL 33308

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code  
FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	DS	<input checked="" type="checkbox"/> DELETE
NAME	WENTZ, MARY	
STREET ADDRESS	3900 OCEAN DR.	
CITY-ST-ZIP	LAND BY THE SEA FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	GOODRUM, DAN	
STREET ADDRESS	3900 OCEAN DR.	
CITY-ST-ZIP	LAND BY THE SEA FL	
TITLE	DT	<input checked="" type="checkbox"/> DELETE
NAME	FRISINGER, EDWARD	
STREET ADDRESS	3900 OCEAN DR.	
CITY-ST-ZIP	LAND BY THE SEA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	AYOUD, JOSEPH	
STREET ADDRESS	3900 OCEAN DR	
CITY-ST-ZIP	LAUD BY THE SEA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BOWIE, ROSS	
STREET ADDRESS	3900 OCEAN DR.	
CITY-ST-ZIP	LAUD BY THE SEA FL	
TITLE	DVP	<input type="checkbox"/> DELETE
NAME	BUNTIN, R	
STREET ADDRESS	3900 OCEAN DR.	
CITY-ST-ZIP	LAUD BY THE SEA FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	John Kontos	
1.3 STREET ADDRESS	3900 Ocean Drive	
1.4 CITY-ST-ZIP	Laud BY The Sea FL 33308	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Ronald Ertley	
3.3 STREET ADDRESS	3900 Ocean Drive	
3.4 CITY-ST-ZIP	Laud By The Sea FL 33308	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jerry Williams 4/29/96 954-776-0732  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)