

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90068 039 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 706831
 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
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 02/14/1964
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 13-2524871
City & State 23	City & State 28	Applied For No Applicable
Zip 24	Country 25	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
	Zip 29	Country 30
9. Name and Address of Current Registered Agent		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
HANNA, MICHAEL D. 3900 OCEAN DRIVE APT. 16B LAUD BY THE SEA FL 33308		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL
		85 Zip Code	

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 office 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: _____ DATE: 4-23-99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANNA, MICHAEL D.	1.2 NAME	
STREET ADDRESS	3900 OCEAN DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAND BY THE SEA FL 33308	1.4 CITY-ST-ZIP	
TITLE	S <input checked="" type="checkbox"/> DELETE	2.1 TITLE	SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FOLEY, MARGARET	2.2 NAME	VERNA, LILLIAN
STREET ADDRESS	3900 OCEAN DR.	2.3 STREET ADDRESS	3900 OCEAN DRIVE
CITY-ST-ZIP	LAND BY THE SEA FL	2.4 CITY-ST-ZIP	LAUD BY THE SEA, FL 33308
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RONALD ERTLEY	3.2 NAME	
STREET ADDRESS	3900 OCEAN DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAND BY THE SEA FL	3.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	4.1 TITLE	DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AYOUD, JOSEPH	4.2 NAME	
STREET ADDRESS	3900 OCEAN DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	LAUD BY THE SEA FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOTZAR, CHARLES	5.2 NAME	
STREET ADDRESS	3900 OCEAN DR.	5.3 STREET ADDRESS	
CITY-ST-ZIP	LAUD BY THE SEA FL 33308	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	VICE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAGGIANO, JAMES	6.2 NAME	
STREET ADDRESS	3900 OCEAN DR.	6.3 STREET ADDRESS	
CITY-ST-ZIP	LAUD BY THE SEA FL 33308	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE: [Signature] DATE: 3-24-99 DAYTIME PHONE #: 954-776-0792

CR2E037 (11/98)