

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769987

FILED
Feb 23, 2009
Secretary of State

Entity Name: FOUNTAINS SOUTH CONDOMINIUM ASSOCIATION NO. 1, INC.

Current Principal Place of Business:

4615 FOUNTAINS DRIVE
SUITE B
LAKE WORTH, FL 334672065 US

New Principal Place of Business:

4615 FOUNTAINS DRIVE
SUITE B
LAKE WORTH, FL 334674133 US

Current Mailing Address:

4615 FOUNTAINS DRIVE
SUITE B
LAKE WORTH, FL 334672065 US

New Mailing Address:

4615 FOUNTAINS DRIVE
SUITE B
LAKE WORTH, FL 334674133 US

FEI Number: 59-2319078

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POULETE, DEBBIE
4615 FOUNTAINS DRIVE
SUITE B
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

POULETE, DEBBIE
4615 FOUNTAINS DRIVE
SUITE B
LAKE WORTH, FL 334674133 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:

02/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SACKS, MARTIN
Address: 5274 FOUNTAINS DR S
City-St-Zip: LAKE WORTH, FL 33467

Title: PD () Delete
Name: TAUMAN, DANIEL
Address: 5146 FOUNTAINS DRIVE SOUTH
City-St-Zip: LAKE WORTH, FL 33467

Title: TD () Delete
Name: GOLDFINGER, ALBERT
Address: 5202 FOUNTAINS DR SOUTH
City-St-Zip: LAKE WORTH, FL 33467

Title: SD () Delete
Name: COLACINO, GLORIA
Address: 5454 FOUNTAIN LN S
City-St-Zip: LAKE WORTH, FL 33467

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: DORIS CAGNER,
Address: 5270 FOUNTAINS DR SOUTH
City-St-Zip: LAKE WORTH, FL 33467

Title: PD (X) Change () Addition
Name: DANIEL TAUMAN,
Address: 5146 FOUNTAINS DRIVE SOUTH
City-St-Zip: LAKE WORTH, FL 33467

Title: TD (X) Change () Addition
Name: ALBERT GOLDFINGER,
Address: 5202 FOUNTAINS DR SOUTH
City-St-Zip: LAKE WORTH, FL 33467

Title: SD (X) Change () Addition
Name: GLORIA COLACINO,
Address: 5154 FOUNTAIN DR SOUTH
City-St-Zip: LAKE WORTH, FL 33467

Title: VD () Change (X) Addition
Name: SANDRA ORFINGER,
Address: 5176 FOUNTAINS DR SOUTH
City-St-Zip: LAKE WORTH, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DANIEL TAUMAN

PRES

02/23/2009

Electronic Signature of Signing Officer or Director

Date