2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2000 8:00 am
Secretary of State
04-24-2000 90092 039 ****61.25

DOCUMENT # 722731

1. Entity Name

FOUNTAINS OF PALM BEACH CONDOMINIUM, INC. NO.3

Principal Place of Business	Mailing Address
4615 FOUNTAINS DR WORTH FL 33467 US	4615 S. FOUNTAINS DR. LAKE WORTH FL 33467 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1511910 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
POULETTE, DEBBIE 4615 S. FOUNTAINS DRIVE LAKE WORTH FL 33467	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TAPPER, STANLEY 4471 LUXEMBURG CT, APT 204 LAKE WORTH, FL 00000 33467	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KATZ, RHODA 4483 LUXEMBURG CT #305 LAKE WORTH, FL 00000	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DANTZIG, ARTHUR 4453 LUXEMBURG CT. LAKE WORTH, FL 00000	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHOTTENFELD,DAVID 4489 LUXEMBURG CT.,#206 LAKE WORTH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NOBEL, CHARLENE 4485 LUXEMBURG CT. LAKEWORTH, FL 33467	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SOYKA,FRED 4467 LUXEMBURG CT. LAKE WORTH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LANDESMAN, HARRY 4471 LUXEMBURG CT., APT. 106 LAKE WORTH, FL 33467	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RUDOLPH, FLORENCE 4489 LUXEMBURG CT APT 203 LAKE WORTH FL 33467	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ROSENBERG, MORTON 4539 LUXEMBURG CT, APT. 201 LAKE WORTH, FL 33467	☐ Change ☒ Addition

CR2E037 (9/99)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stanley Tapper SIGNATURE REQUIRED 4·17·00 561 964·3600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #