2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like

SIGNATURE:

FILED DOCUMENT # 723672 Apr 25, 2000 8:00 am Secretary of State 1. Entity Name THE FOUNTAINS OF PALM BEACH CONDOMINIUM, INC. NO 04-25-2000 90069 003 ****61.25 Principal Place of Business Mailing Address 4615 FOUNTAINS DR. 4615 FOUNTAINS DR. LAKE WORTH FL 33467-2065 LAKE WORTH FL 33467-4155 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State Applied For 4. FEI Number City & State 59-1511441 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) POULETTE, DEBBIE 4615 FOUNTAINS DR. LAKE WORTH FL 33467 Zip Code City FI 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) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. SD Change Addition TITLE ☐ Delete NAME CANTER, MARY NAME STREET ADDRESS STREET ADDRESS 4822 ESEDRA CT 201 CITY-ST-ZIP CITY-ST-7IP LAKE WORTH FL ☐ Addition ☐ Change ☐ Delete TITLE TITLE PTD DOMBROWSKY, NORMAN NAME NAME STREET ADDRESS STREET ADDRESS 4805 ESEDRA COURT CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL Change Addition TITLE ☐ Defete TITLE HIRSCH, SEYMOUR NAME NAME STREET ADDRESS STREET ADDRESS 4803 ESEDRA COURT CITY-ST-7/P CITY-ST-ZIP lake worth fl D Change Addition TITLE ۷D ☐ Delete TITLE SLOVIN, ETHEL NAME STREET ADDRESS STREET ADDRESS 4801 ESEDRA CT., #208 CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL Addition TITLE ☐ Delete TITLE Change JAVER, LEONARD NAME NAME 4140 ESEDRA COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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

561 964. 3600

Date