## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 768023**

## FOUNTAINS SOUTH PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business Mailing Address 4615 S. FOUNTAINS DR 1015 S. FOUNTAINS DR LAKE WORTH FL 33467 WORTH FL 33467 US

## **FILED** Apr 26, 2000 8:00 am Secretary of State

04-26-2000 90188 040 \*\*\*\*61.25



2. Principal P	Place of Busine	ss	3. Mailing Address				{						
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE						
City & Stat	e		City & State			<del></del>	4. FEI Number 59-2340750				pplied For ot Applicable	}	
Zip Country			Zip	Cou	Country		5. Certificate	of Status Desired		88.75 Ac		1	
6. Name and Address of Current Registered Agent							7. Name and	Address of New Regi	stered A	gent · ·		٦	
						Name							
POULETTE, DEBBIE 4615 S. FOUNTAINS DR. LAKE WORTH FL 33467					Street Address (P.O. Box Number is Not Acceptable)								
					City Zip Code								
						City FL   Z					.ip 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  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											·		
	FILE N FEE IS \$	OW:	9. Election Campaign Financing Trust Fund Contribution.			\$5.00 Added	May Be to Fees			ayable to	D		
10.	ECTORS	11.			DDITIONS/CHA	ANGES TO OFFICERS	AND DIR	ECTORS If	V 10	7			
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NAME	KRIEGER, H	erbert	,	NAME								] છ	
STREET ADDRESS		57-705 FOUNTAINS DR S		STREE	T ADDRESS							F037	
CITY-ST-ZIP	LAKE WORTH FL 33467			CITY-ST-ZiP								4	
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		ASTER, SEYMOUR		NAME								1	
STREET ADDRESS	6872 PARIS	2 PARISIAN WAY			TADDRESS		•						
CITY-ST-ZIP	LAKE WORT	KE WORTH FL 33467		CITY-	ST-ZIP							١,	
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	SELD, HOW	LE, HOMAID		NAME		GLA.	sser, of	THINKE CIRC	LE			1	
STREET ADDRESS	5257 FOUNTAINS DR. SO #702			STREE		GLASSER, JEANNE 6849 FOUNTAINS CIRCLE LAKE WORTH, FL 33467							
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		TAINS CIRCLE										1	
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	RAUCHMAN		NA cti		1								
STREET ADDRESS CITY-ST-ZIP		OUNTAING GINGLE			t address St-Zip	ł	•					1	
	LAKE WORT	H FL 33467			O 1 - CIL.	<del></del>		·				-	
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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 attacking with an address, with all other like empowered.

SIGNATURE,