

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 19, 2004 8:00 am**  
**Secretary of State**

04-19-2004 90384 019 \*\*\*\*61.25

**DOCUMENT # 729070**

1. Entity Name

THE FOUNTAINS OF PALM BEACH CONDOMINIUM, INC.  
NO. 7



Principal Place of Business

4615 FOUNTAINS DR.  
LAKE WORTH FL 33467  
US

Mailing Address

4615 FOUNTAINS DR.  
LAKE WORTH FL 33467  
US

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

59-1577287

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 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME SEMANS, LLOYD ☐ Delete  
STREET ADDRESS 4130 TIVOLI CT APT 108  
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE D  
NAME Semans, Lloyd ☒ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD  
NAME GABER, HOWARD ☐ Delete  
STREET ADDRESS 4120 TIVOLI CT APT 203  
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE PD  
NAME Gaber, Howard ☒ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VD  
NAME RATNER, STUART ☒ Delete  
STREET ADDRESS 4080 TIVOLI CT APT 103  
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE VD  
NAME Kravet, Alan ☐ Change ☒ Addition  
STREET ADDRESS 4120 Tivoli Ct. Apt. 207  
CITY-ST-ZIP Lake Worth, FL 33467

TITLE SD  
NAME BLOCK, LAURENCE ☒ Delete  
STREET ADDRESS 4090 TIVOLI CT #108  
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE TD  
NAME Morgenstein, William ☐ Change ☒ Addition  
STREET ADDRESS 4098 Tivoli Court  
CITY-ST-ZIP Lake Worth, FL 33467

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD  
NAME Donnelly, James ☐ Change ☒ Addition  
STREET ADDRESS 4070 Tivoli Ct. Apt. 207  
CITY-ST-ZIP Lake Worth, FL 33467

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3600