

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90032 035 ****61.25

DOCUMENT # N18187

1. Entity Name
FOUNTAINS SOUTH ATRIUM HOMES ASSOCIATION,
INC.



Principal Place of Business
4615 B FOUNTAINS DR
LAKE WORTH, FL 33467 US

Mailing Address
4615 B FOUNTAINS DR
LAKE WORTH, FL 33467 US

60015820



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01102006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-2726552

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

POULETTE, DEBBIE
4615 B FOUNTAINS DR
LAKE WORTH, FL 33467

7. Name and Address of New Registered Agent

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

**Filing Fee is \$61.25
Due by May 1, 2006**

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

TITLE SD ☐ Delete
NAME AMSTET, BOB
STREET ADDRESS 6752 PALERMO WAY
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE D ☒ Delete
NAME BERNSTEIN, HERMAN
STREET ADDRESS 6724 PALERMO WAY
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE TD ☒ Delete
NAME ZALK, MILTON
STREET ADDRESS 6772 PALERMO WAY
CITY-ST-ZIP LAKE WORTH, FL

TITLE VD ☒ Delete
NAME MANNING, IRVING DR
STREET ADDRESS 6791 FOUNTAINS CIRCLE
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE PD ☒ Delete
NAME SAUNDERS, STANLEY DR.
STREET ADDRESS 6740 PALERMO WAY
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE OV ☒ Change ☐ Addition
NAME A mstel, Bob
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Change ☒ Addition
NAME Holtz Beverly
STREET ADDRESS 6638 Fountains Circle
CITY-ST-ZIP Lake Worth, FL 33467

TITLE TD ☐ Change ☒ Addition
NAME Kresge, David
STREET ADDRESS 6614 Fountains Circle
CITY-ST-ZIP Lake Worth, FL 33467

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

TITLE PD ☐ Change ☒ Addition
NAME Levine, Sheldon
STREET ADDRESS 6756 Palerme Way
CITY-ST-ZIP Lake Worth, FL 33467

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

Sheldon Levine

2/9/06

(561) 964-3600

Date

Daytime Phone #