

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 768023

**FILED**  
**Jan 27, 2011**  
**Secretary of State**

**Entity Name:** FOUNTAINS SOUTH PROPERTY OWNERS ASSOCIATION,INC.

**Current Principal Place of Business:**

4615 FOUNTAINS DR  
STE B  
LAKE WORTH, FL 33467 US

**New Principal Place of Business:**

**Current Mailing Address:**

4615 FOUNTAINS DR  
STE B  
LAKE WORTH, FL 33467 US

**New Mailing Address:**

**FEI Number:** 59-2340750

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

POULETTE, DEBBIE  
4615 FOUNTAINS DR.  
STE B  
LAKE WORTH, FL 33467 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: KRIEGER, HERBERT  
Address: 5757 FOUNTAINS DRIVE S; #705  
City-St-Zip: LAKE WORTH, FL 33467

Title: STD  
Name: HOLTZER, BERNARD  
Address: 5326 FOUNTAINS DR SO  
City-St-Zip: LAKE WORTH, FL 33467

Title: DP  
Name: SOLOMON, BARRY  
Address: 5482 SAN MARINO WAY  
City-St-Zip: LAKE WORTH, FL 33467

Title: DV  
Name: CARLIN, STEPHEN  
Address: 6809 FOUNTAINS CR  
City-St-Zip: LAKE WORTH, FL 33467

Title: D  
Name: WISHNOFF, STANLEY  
Address: 6816 PARISIAN WAY  
City-St-Zip: LAKE WORTH, FL 33467

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: BARRY SOLOMON

P

01/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date