2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2011
Secretary of State

DOCUMENT# 770526

Entity Name: FOUNTAINS SOUTH VILLAS 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: 59-2340332 **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: SCHWARTZ, MIKE
Address: 6861 FOUNTAINS CR
City-St-Zip: LAKE WORTH, FL 33467

Title: D
Name: KREINER, STUART
Address: 6817 FOUNTAINS CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: TD
Name: ORLOFF, IRVING
Address: 6858 FOUNTAINS CIR.
City-St-Zip: LAKE WORTH, FL 33467

Title: SD
Name: BERLANT, NORMAN
Address: 6813 FOUNTAINS CR
City-St-Zip: LAKE WORTH, FL 33467

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

Title: VD
Name: GILMORE, LORRAINE
Address: 6891 FOUNTAINS CR
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: STEPHEN CARLIN P 01/27/2011

Electronic Signature of Signing Officer or Director Date