

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 706831

**FILED**  
**Mar 13, 2018**  
**Secretary of State**  
**CC9404994609**

**Entity Name:** FOUNTAINHEAD ASSOCIATION, INC.

**Current Principal Place of Business:**

3900 N. OCEAN DR.  
LAUDERDALE BY THE SEA, FL 33308

**Current Mailing Address:**

3900 N. OCEAN DR.  
LAUDERDALE BY THE SEA, FL 33308

**FEI Number:** 13-2524871

**Certificate of Status Desired:** No

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

BECKER & POLIAKOFF, P.A.  
625 N. FLAGLER DRIVE  
7TH FLOOR  
WEST PALM BEACH, FL 33401 US

*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

**Officer/Director Detail :**

Title T  
Name KRAMER, ROBERT  
Address 3900 N OCEAN DR #14B  
City-State-Zip: LAUDERDALE BY THE SEA FL 33308

Title P  
Name MISKE, BARRY  
Address 3900 N OCEAN DR #9E  
City-State-Zip: LAUDERDALE BY THE SEA FL 33308

Title S  
Name HAMLET-METZ, MARIO  
Address 3900 N. OCEAN DR #12G  
City-State-Zip: LAUDERDALE BY THE SEA FL 33308

Title VP  
Name PETRELLO, GEORGE  
Address 3900 N OCEAN DR #8C  
City-State-Zip: LAUDERDALE BY THE SEA FL 33308

Title D  
Name LOMBARDO, PETER  
Address 3900 N OCEAN DR #3B  
City-State-Zip: LAUDERDALE BY THE SEA FL 33308

Title D  
Name GITTINGS, MICHAEL  
Address 3900 N OCEAN DR #11A  
City-State-Zip: LAUDERDALE BY THE SEA FL 33308

Title D  
Name ERDMAN, LEONARD  
Address 3900 N OCEAN DR #4G  
City-State-Zip: LAUDERDALE BY THE SEA FL 33308

Title D  
Name NAUGHTON, JAMES  
Address 3900 N. OCEAN DR. #9B  
City-State-Zip: LAUDERDALE BY THE SEA FL 33308

*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 MISKE

**PRESIDENT**

**03/13/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date