#### 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# 722731

#### Entity Name: FOUNTAINS OF PALM BEACH CONDOMINIUM, INC. NO.3

# **Current Principal Place of Business:**

4615 FOUNTAINS DR SUITE B LAKE WORTH, FL 33467

## **Current Mailing Address:**

4615 FOUNTAINS DR SUITE B LAKE WORTH, FL 33467 US

## FEI Number: 59-1511910

## Name and Address of Current Registered Agent:

4539 LUXEMBURG CT. #101

POULETTE, DEBBIE 4615 FOUNTAINS DRIVE SUITE B LAKE WORTH, FL 33467 US Certificate of Status Desired: No

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:

Address

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

|  | Title           | PD                      | Title           | VSD                     |
|--|-----------------|-------------------------|-----------------|-------------------------|
|  | Name            | STROUCH, STANLEY        | Name            | FINKELSTEIN, MARTIN     |
|  | Address         | 4523 LUXEMBURG CT.      | Address         | 4545 LUXEMBURG C.T. 204 |
|  | City-State-Zip: | LAKE WORTH FL 33467     | City-State-Zip: | LAKE WORTH FL 33467     |
|  |                 |                         |                 |                         |
|  | Title           | VD                      | Title           | DT                      |
|  | Name            | LEONARD, JACK           | Name            | STORCH, GERALD          |
|  | Address         | 4539 LUXEMBURG CT., 103 | Address         | 4465 LUXEMBURG CT. #101 |
|  | City-State-Zip: | LAKE WORTH FL 33467     | City-State-Zip: | LAKE WORTH FL 33467     |
|  |                 |                         |                 |                         |
|  | Title           | D                       |                 |                         |
|  | Name            | BAIMAN, MARVIN          |                 |                         |
|  |                 |                         |                 |                         |

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.

PRESIDENT

#### SIGNATURE: STANLEY STROUCH

City-State-Zip: LAKE WORTH FL 33467

Electronic Signature of Signing Officer/Director Detail

# FILED Mar 15, 2013 Secretary of State CC3102312465

Date

03/15/2013 Date