

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725568

Entity Name: THE FOUNTAINS OF PALM BEACH CONDOMINIUM, INC. NO. 5**Current Principal Place of Business:**4615 FOUNTAINS DR.
STE B
LAKE WORTH, FL 33467**Current Mailing Address:**4615 FOUNTAINS DR.
STE B
LAKE WORTH, FL 33467 US**FEI Number:** 59-1723300**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**POULETTE, DEBBIE
4615 FOUNTAINS DRIVE
STE B
LAKE WORTH, FL 33467 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	PD
Name	CIANCANELLI, BERNARD
Address	4242 D'ESTE CT #204
City-State-Zip:	LAKE WORTH FL 33467

Title	SD
Name	MEHLHORN, GRACE
Address	4248 D'ESTE COURT #206
City-State-Zip:	LAKE WORTH FL 33467

Title	TD
Name	DIAMOND, HOWARD
Address	4250 D'ESTE CT
City-State-Zip:	LAKE WORTH FL 33467

Title	D
Name	SCHNEIDER, WALTER
Address	4290 D'ESTE COURT #307
City-State-Zip:	LAKE WORTH FL 33467

Title	D VP
Name	FINELLI, RICHARD
Address	4242 D'ESTE COURT #303
City-State-Zip:	LAKE WORTH FL 33467

Title	D
Name	DIBO, JACK
Address	4236 D'ESTE COURT #102
City-State-Zip:	LAKE WORTH FL 33467

Title	D
Name	SOLOMON, ROXANNE DR.
Address	4242 D'ESTE COURT #206
City-State-Zip:	LAKE WORTH FL 33467

Title	D
Name	BURKE, ISABELLE
Address	4284 D'ESTE COURT #107
City-State-Zip:	LAKE WORTH FL 33467

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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: BERNARD CIANCANELLI

PRESIDENT

02/08/2016

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title D
Name COHEN, MARCIA
Address 4284 D'ESTE COURT
#207
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name DIAMOND, PHIL
Address 4230 D'ESTE CT.
APT.307
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name JASSIR, MAGDALENA
Address 4254 D'ESTE CT.
APT.103
City-State-Zip: LAKE WORTH FL 33467