

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729070

Entity Name: THE FOUNTAINS OF PALM BEACH CONDOMINIUM, INC. NO. 7**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:** 59-1577287**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	TD
Name	DONNELLY, JAMES
Address	4070 TIVOLI CT #207
City-State-Zip:	LAKE WORTH FL 33467

Title	D, PRESIDENT
Name	HARRIS, RANDE
Address	4130 TIVOLI CT #208
City-State-Zip:	LAKE WORTH FL 33467

Title	D
Name	STACEY, JAMES
Address	4120 TIVOLI COURT #106
City-State-Zip:	LAKE WORTH FL 33467

Title	DIRECTOR, SECRETARY
Name	SMITH, JERRY
Address	4110 TIVOLI COURT APT. 305
City-State-Zip:	LAKE WORTH FL 33467

Title	DIRECTOR, VP
Name	MERCADO, JUAN (JOHN)
Address	4128 TIVOLI CT
City-State-Zip:	LAKE WORTH FL 33467
Title	D
Name	MORGENSTEIN, WILLIAM
Address	4098 TIVOLI COURT
City-State-Zip:	LAKE WORTH FL 33467
Title	DIRECTOR
Name	HARRIS, SCOTT
Address	4702 FOUNTAINS DRIVE SOUTH APT. 101
City-State-Zip:	LAKE WORTH FL 33467
Title	DIRECTOR
Name	LEWKOWITZ, JUDY
Address	4130 TIVOLI COURT APT. 202
City-State-Zip:	LAKE WORTH FL 33467

Continues on page 2

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: RANDE HARRIS**PRESIDENT****04/04/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	LEVINE, LOWELL
Address	4110 TIVOLI COURT APT. 102
City-State-Zip:	LAKE WORTH FL 33467