

2017 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
Name BROOKS, HAROLD
Address 4070 TIVOLI CT #208
City-State-Zip: LAKE WORTH FL 33467

Title D
Name AMENDOLA, THOMAS
Address 4120 TIVOLI COURT
#103
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, PRESIDENT
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 KRAVET, ALAN
Address 4120 TIVOLI COURT
#207
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR, VP
Name LEWKOWITZ, JUDY
Address 4130 TIVOLI COURT
APT. 202
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: JUAN (JOHN) MERCADO

PRESIDENT

04/19/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	GABER, HOWARD
Address	4120 TIVOLI COURT APT. 306
City-State-Zip:	LAKE WORTH FL 33467