

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761175

Entity Name: THE FOUNTAINS OF PALM BEACH CONDOMINIUM, INC. NO. 9**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:** 59-2171993**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SENESE, VITO
4615 FOUNTAINS DR
SUITE 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:** VITO SENESE

04/11/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR, TREASURER
Name SCHOENFELD, STANLEY
Address 4661 FOUNTAINS DR. SO., #210
City-State-Zip: LAKE WORTH FL 33467

Title VP, DIRECTOR
Name ROTHSCHILD, BARBARA
Address 4501 FOUNTAINS DRIVE
#105
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY, DIRECTOR
Name HARRIS, LISA
Address 4657 FOUNTAINS DRIVE SOUTH
APT. 205
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name LIVSHITZ, STANLEY
Address 4657 FOUNTAINS DRIVE SOUTH
APT.201
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name OCHACHER, LILLIAN
Address 4661 FOUNTAINS DRIVE SOUTH
APT.216
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name TULUCCI, JOHN
Address 4661 FOUNTAINS DRIVE SOUTH
113
City-State-Zip: LAKE WORTH FL 33467

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: STANLEY SCHOENFELD

PRESIDENT

04/11/2022

Electronic Signature of Signing Officer/Director Detail

Date