

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 770526

**Entity Name:** FOUNTAINS SOUTH VILLAS ASSOCIATION, INC.**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:** 59-2340332**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**POULETTE, DEBBIE  
4615 FOUNTAINS DR  
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 HARRIS, RONALD  
Address 6805 FOUNTAINS CIRCLE  
City-State-Zip: LAKE WORTH FL 33467Title VP, DIRECTOR  
Name LEVETOWN, ROBERTA  
Address 6809 FOUNTAINS CIRCLE  
City-State-Zip: LAKE WORTH FL 33467Title D  
Name LEONARD, JACK  
Address 6983 FOUNTAINS CIRCLE  
City-State-Zip: LAKE WORTH FL 33467Title D  
Name TONETTI, LAWRENCE  
Address 6967 FOUNTAINS CIRCLE  
City-State-Zip: LAKE WORTH FL 33467Title DIRECTOR, SECRETARY  
Name ROSENTHAL, JOEL  
Address 6849 FOUNTAINS CIRCLE  
City-State-Zip: LAKE WORTH FL 33467Title D  
Name HURWITZ, DIANE  
Address 6902 FOUNTAINS CIRCLE  
City-State-Zip: LAKE WORTH FL 33467Title D, PRESIDENT  
Name HOROWITZ, BARRY  
Address 6981 FOUNTAINS CIRCLE  
City-State-Zip: LAKE WORTH FL 33467Title DIRECTOR  
Name MENSCHER, IVAN  
Address 6901 FOUNTAINS CIRCLE  
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:** BARRY HOROWITZ

PRESIDENT

02/15/2021

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	MOORHEAD, GERNIE
Address	6868 FOUNTAINS CIRCLE
City-State-Zip:	LAKE WORTH FL 33467