Entity Name: FOUNTAIN SQUARE OFFICE CONDOMINIUM ASSOCIATION, INC.	Secretary of State 4374154163CC
Current Principal Place of Business:	
70 N.E. 5TH AVENUE DELRAY BEACH, FL 33483	
Current Mailing Address:	
88 NE 5TH AVE DELRAY BEACH, FL 33483 US	
FEI Number: 41-0944201 Certificate	e of Status Desired: No
Name and Address of Current Registered Agent:	
SECURE PROPERTY MANAGEMENT 88 NE 5TH AVE DELRAY BEACH, FL 33483 US	
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or b	ooth, in the State of Florida.
SIGNATURE: TOM PERRY	05/15/2020
Electronic Signature of Registered Agent	Date

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003674

Officer/Director Detail :			
Title	DIRECTOR	Title	D
Name	CARTER, DAN	Name	BROWN, HARVEY
Address	NE 5TH AVE	Address	NE 5TH AVE
City-State-Zip:	DELRAY BEACH FL 33483	City-State-Zip:	DELRAY BEACH FL 33483
Title	DIRECTOR	Title	PRESIDENT
Name	PERRY, MARK	Name	SCHAPPERT, KEN
Address	N.E. 5TH AVENUE	Address	NE 5TH AVE
City-State-Zip:	DELRAY BEACH FL 33483	City-State-Zip:	DELRAY BEACH FL 33483
Title	DIRECTOR		
Name	ODONNEL, KEVIN		
Address	NE 5TH AVE		
City-State-Zip:	DELRAY BEACH FL 33483		

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: KEN SCHAPPERT

PRESIDENT

05/15/2020

FILED May 15, 2020

Electronic Signature of Signing Officer/Director Detail

Date