

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05991

Entity Name: FOUNTAINS SOUTH VILLAS TWO ASSOCIATION, INC.

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: 59-2519209

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POULETTE, DEBBIE
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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name WISHNOFF, STANLEY
Address 6816 PARISIAN WAY
City-State-Zip: LAKE WORTH FL 33467

Title VPD
Name STEWART, DIANE
Address 6844 PARISIAN WAY
City-State-Zip: LAKE WORTH FL 33467

Title TD
Name EHRLICH, BEN
Address 6965 PARISIAN WAY
City-State-Zip: LAKE WORTH FL 33467

Title D
Name KAYE, SUSAN
Address 6945 PARISIAN WAY
City-State-Zip: LAKE WORTH FL 33467

Title D
Name EDELMAN, LAURA
Address 6864 PARISIAN WAY
City-State-Zip: LAKE WORTH FL 33467

Title SD
Name RASCOVAR, LEE
Address 6848 PARISIAN WAY
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 WISHNOFF

PRESIDENT

02/14/2014

Electronic Signature of Signing Officer/Director Detail

Date