

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14528

**FILED**  
**Mar 13, 2016**  
**Secretary of State**  
**CC5157669660**

**Entity Name:** FOUNTAINVIEW ESTATES FRIENDSHIP COUNCIL, INC.

**Current Principal Place of Business:**

FOUNTAINVIEW ESTATE  
8800 BERKSHIRE LANE  
TAMPA, FL 33635

**Current Mailing Address:**

FOUNTAINVIEW ESTATE  
8800 BERKSHIRE LANE  
TAMPA, FL 33635 US

**FEI Number: 06-0197900**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ZAMBRANO, LEONA  
8826 BALFOUR RD  
TAMPA, FL 33635 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:** LEONA ZAMBRANO

03/13/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title T  
Name LAFOUNTAIN, ALICE  
Address 9117 GROSSE PTE BLVD  
City-State-Zip: TAMPA FL 33635

Title D  
Name KNUDSEN, BARBARA  
Address 8801 MORAN  
City-State-Zip: TAMPA FL 33635

Title D  
Name DIMARTINO, JOSEPHINE  
Address 8817 LOCHMOOR RD  
City-State-Zip: TAMPA FL 33635

Title D  
Name HUGHES, KATHLEEN  
Address 8818 HIGBIE PL.  
City-State-Zip: TAMPA FL 33635

Title D  
Name VARNUM, SUE  
Address 8829 WELLINGTON DRIVE  
City-State-Zip: TAMPA FL 33635

Title D  
Name DELGADO, STEVE  
Address 8812 SHORHAM RD  
City-State-Zip: TAMPA FL 33635

*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:** ALICE LAFOUNTAIN

**TREASURER**

03/13/2016

Electronic Signature of Signing Officer/Director Detail

Date