

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18187

Entity Name: FOUNTAINS SOUTH ATRIUM HOMES ASSOCIATION, INC.

FILED
Feb 14, 2014
Secretary of State
CC6816222507

Current Principal Place of Business:

4615 FOUNTAINS DR
SUITE B
LAKE WORTH, FL 33467-4133

Current Mailing Address:

4615 FOUNTAINS DR
SUITE B
LAKE WORTH, FL 33467-4133 US

FEI Number: 59-2726552

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POULETTE, DEBBIE
4615 FOUNTAINS DR
SUITE B
LAKE WORTH, FL 33467-4133 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 SD
Name FINBERG, EDWARD
Address 6700 PALERMO WAY
City-State-Zip: LAKE WORTH FL 33467

Title TD
Name DAVID KRESGE
Address 6614 FOUNTAINS CIR
City-State-Zip: LAKE WORTH FL 33467

Title PD
Name SHELDON LEVINE
Address 6756 PALERMO WAY
City-State-Zip: LAKE WORTH FL 33467

Title VPD
Name DAVID, STANLEY
Address 6602 FOUNTAINS CR
City-State-Zip: LAKE WORTH FL 33467

Title D
Name CIBLEY, ALBERT
Address 6713 PALERMO WAY
City-State-Zip: LAKE WORTH FL 33467

Title D
Name SALADINO, THOMAS
Address 6674 FOUNTAINS CIRCLE
City-State-Zip: LAKE WORTH FL 33467

Title D
Name RICHARDS, SCOTT
Address 6760 PALERMO 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: SHELDON LEVINE

PRESIDENT

02/14/2014

Electronic Signature of Signing Officer/Director Detail

Date