

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21774

FILED
Apr 29, 2024
Secretary of State
6583704429CC

Entity Name: FOUNTAIN LAKES COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

C/O PEGASUS PROPERTY MANAGEMENT
8840 TERRENE COURT SUITE 102
BONITA SPRINGS, FL 34135

Current Mailing Address:

C/O PEGASUS PROPERTY MANAGEMENT
8840 TERRENE COURT SUITE 102
BONITA SPRINGS, FL 34135 US

FEI Number: 06-1230266

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHAPMAN, MICHAEL
8840 TERRENE COURT
SUITE 102
BONITA SPRINGS, FL 34135 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: MICHAEL CHAPMAN

04/29/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HILDEBRAND, JANET
Address 8840 TERRENE COURT
 SUITE 102
City-State-Zip: BONITA SPRINGS FL 34135

Title TREASURER
Name SMITH, LORI
Address 8840 TERRENE COURT
 SUITE 102
City-State-Zip: BONITA SPRINGS FL 34135

Title SECRETARY
Name RELLIAS, JOHN
Address 8840 TERRENE COURT
 SUITE 102
City-State-Zip: BONITA SPRINGS FL 34135

Title VP
Name CHEW, KEITH
Address C/O PEGASUS PROPERTY
 MANAGEMENT
 8840 TERRENE COURT SUITE 102
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name DELUCIA, RICK
Address C/O PEGASUS PROPERTY
 MANAGEMENT
 8840 TERRENE COURT SUITE 102
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name THEALL, FARRELL
Address C/O PEGASUS PROPERTY
 MANAGEMENT
 8840 TERRENE COURT SUITE 102
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name DICKERSON, WES
Address 8840 TERRENE CT.
 STE 102
City-State-Zip: BONITA SPRINGS FL 34135

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: JANET HILDEBRAND

PRESIDENT

04/29/2024

Electronic Signature of Signing Officer/Director Detail

Date