2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47073

Entity Name: THE FOUNTAINS OF PALM BEACH CONDOMINIUM NO. 6, INC.

FILED
Mar 12, 2020
Secretary of State
4112290086CC

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: 59-1511440 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POULETTE, DEBBIE 4615 FOUNTAINS DR SUITE B LAKE WORTH, FL 33467-4997 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	Title	D
Name	SALADINO, THOMAS	Name	CHESTER, IRENE
Address	6674 FOUNTAINS CIRCLE	Address	4408 FOUNTAINS DRIVE
City-State-Zip:	LAKE WORTH FL 33467	City-State-Zip:	LAKE WORTH FL 33467
Title	D	Title	D, TREASURER
Name	KEMPNER, EDNA	Name	RANDALL, JEROME
Address	4384 FOUNTAINS DRIVE	Address	4350 FOUNTAINS DRIVE
City-State-Zip:	LAKE WORTH FL 33467	City-State-Zip:	LAKE WORTH FL 33467
Title	SECRETARY, DIRECTOR	Title	DIRECTOR
Title Name	SECRETARY, DIRECTOR CREEGAN, ELSIE	Title Name	DIRECTOR SHELTON, STEFANIE
Name	CREEGAN, ELSIE	Name	SHELTON, STEFANIE
Name Address	CREEGAN, ELSIE 4482 FOUNTAINS DRIVE	Name Address	SHELTON, STEFANIE 4428 FOUNTAINS DRIVE
Name Address City-State-Zip:	CREEGAN, ELSIE 4482 FOUNTAINS DRIVE LAKE WORTH FL 33467	Name Address City-State-Zip:	SHELTON, STEFANIE 4428 FOUNTAINS DRIVE LAKE WORTH FL 33467
Name Address City-State-Zip:	CREEGAN, ELSIE 4482 FOUNTAINS DRIVE LAKE WORTH FL 33467 DIRECTOR, VP	Name Address City-State-Zip:	SHELTON, STEFANIE 4428 FOUNTAINS DRIVE LAKE WORTH FL 33467 DIRECTOR

SIGNATURE: THOMAS SALADINO

PRESIDENT

03/12/2020

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.