

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712622

FILED  
Jan 05, 2010  
Secretary of State

**Entity Name:** FOUNTAINHEAD CONDOMINIUM, INC.

**Current Principal Place of Business:**

2131 LAKEVIEW DRIVE  
BUSINESS OFFICE  
SEBRING, FL 338703195 US

**New Principal Place of Business:**

**Current Mailing Address:**

2131 LAKEVIEW DRIVE  
BUSINESS OFFICE  
SEBRING, FL 338703195 US

**New Mailing Address:**

**FEI Number:** 59-1173254

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WHEELER, JUNE R TREAS  
2131 LAKEVIEW DR  
#504  
SEBRING, FL 338703195 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: ZORN, ROBERT PRES  
Address: 12606 OAK GROVE DRIVE  
City-St-Zip: HUNTLEY, IL 60142

Title: SEC  
Name: RAINEY, JOHN SEC  
Address: 2131 LAKEVIEW DRIVE #1008  
City-St-Zip: SEBRING, FL 33870 US

Title: TREA  
Name: WHEELER, JUNE R TREAS  
Address: 2131 LAKEVIEW DRIVE #504  
City-St-Zip: SEBRING, FL 33870

Title: VP  
Name: WILSON, RAYMOND VP  
Address: 2131 LAKEVIEW DR 506  
City-St-Zip: SEBRING, FL 33870

Title: A-TR  
Name: WELLS, LOIS A-TR  
Address: 2131 LAKEVIEW DRIVE #208  
City-St-Zip: SEBRING, FL 33870

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: JUNE R. WHEELER

TRS

01/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date