

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 722731

**FILED**  
**Feb 15, 2010**  
**Secretary of State**

**Entity Name:** FOUNTAINS OF PALM BEACH CONDOMINIUM, INC. NO.3

**Current Principal Place of Business:**

4615 FOUNTAINS DR  
SUITE B  
LAKE WORTH, FL 33467 US

**New Principal Place of Business:**

**Current Mailing Address:**

4615 FOUNTAINS DR  
SUITE B  
LAKE WORTH, FL 33467 US

**New Mailing Address:**

**FEI Number:** 59-1511910

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POULETTE, DEBBIE  
4615 S. FOUNTAINS DRIVE  
SUITE B  
LAKE WORTH, FL 33467 US

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

POULETTE, DEBBIE  
4615 FOUNTAINS DRIVE  
SUITE B  
LAKE WORTH, FL 33467 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

02/15/2010

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: STROUCH, STANLEY  
Address: 4523 LUXEMBURG CT.  
City-St-Zip: LAKE WORTH, FL 33467

Title: VSD  
Name: FINKELSTEIN, MARTIN  
Address: 4545 LUXEMBURG C.T. 204  
City-St-Zip: LAKE WORTH, FL 33467

Title: D  
Name: LEONARD, JACK  
Address: 4539 LUXEMBURG CT., 103  
City-St-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: DEBBIE POULETTE

MGR

02/15/2010

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

\_\_\_\_\_  
Date