## 2002 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 725568**

1. Entity Name

## THE FOUNTAINS OF PALM BEACH CONDOMINIUM, INC. NO

. 5

Principal Place of Business

Mailing Address



05-07-2002 90366 045 \*\*\*\*61.25

4615 FOUNTAINS DR. LAKE WORTHIFLE 33467-2065 US		4615 FOUNTAINS DR. LAKE WORTH FL 33467-2065 US		ţ ,			
2. Principal Place of Business 3.		3. Mailing Address	3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State		City & State	City & State		4. FEI Number Applied For		
Zip Country					50-1722200		Not Applicable
Zip Country Z		Zip	D Country		5. Certificate of Status Desired S8.75 Additional Fee Required		
	6. Name and Address of Current	Registered Agent		7. Name and Ad	dress of New Registered		<del></del>
			Name			3	
	E, DEBBIE		Stree	Street Address (P.O. Box Number is Not Acceptable)			
	FOUNTAIN DRIVE				in in	<del></del> -	
DAVE MO	DRTH FL 33467		City	-	FL	Zip Cod	de
8. The above	re named entity submits this statement for	the purpose of changing its	s registered office	or registered agent, or both, in		-	
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOT	TE: Registered Agent sig	nature required when reinstating)	DATE		
	FILE NOW: FEE IS \$61.25	Trust Fund (	n Campaign Financing und Contribution. \$5.00 May Be Added to Fees Make Check Payable to Department of State				
10.	OFFICERS AND DIR	ECTORS	11.	ADDITIONS/CHANG	ES TO OFFICERS AND DI	RECTORS IN	V 10
TITLE NAME	VD Taylor dr. Alan	☐ Delete	TITLE			☐ Change	☐ Addition
STREET ADDRESS	4254 DESTE CT. 307		NAME Street Address				
CITY-ST-ZIP	LAKE WORTH FL		CITY-ST-ZIP				
TITLE '	PD	☐ Delete	TITLE			Change	Addition
NAME -	LAMBERT ROBERT		NAME			onange	
STREET ADDRESS	4254 DESTE CT 102 LAKE WORTH FL		STREET ADDRESS				
TITLE	VSD	☐ Delete	TITLE	VD	رخست سے در رہے ہ	Change	—
NAME	CEDERBAUM, HAROLD	- 50000	NAME			Change	☐ Addition
STREET ADDRESS	4254 D'ESTE COURT, APT. 303		STREET ADDRESS				
CITY-ST-ZIP	LAKE WORTH FL 33467	<del></del>	CITY-ST-ZIP				
itle Iame	STORCH, CLIFFORD	☐ Delete	TITLE			Change	☐ Addition
	4290 D'ESTE CPOURT APT 207		NAME STREET ADDRESS				
CITY-ST-ZIP	LAKE WORTH FL 33467		CITY-ST-ZIP				
ITLE	TD	☐ Delete	TITLE	<u> </u>	<del></del>	☐ Change	Addition
AME	SIEGEL, HERBERT		NAME			☐ Glange	Addition
	4228 D'ESTE COURT		STREET ADDRESS				
TY-ST-ZIP	LAKE WORTH FL		CITY-ST-ZIP		77		
ITLE AME		☐ Delete	TITLE	50		☐ Change	Addition .
TREET ADDRESS			NAME STREET ADDRESS	KICH, ELINOR	T AAT 200		
ITY-ST-ZIP		•	CITY-ST-ZIP	RICH, ELINOR 4284 D'ESTE C' LALLE WORTH, F	33462		
2. I hereby c	certify that the information supplied with the	s filing does not qualify for		ated in Section 119 07/2/// Ele	rida Statutan I fumbra	6 . Ale es ale es a	

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

4-16-02

561 964. 3600