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FILED
Apr 27 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 731853 (8)
1. Corporation Name

FOUNTAINS CONDOMINIUM OPERATIONS, INC.



Principal Place of Business
4615 FOUNTAINS DR
LAKE WORTH FL 33467-2065
US

Mailing Address
4615 FOUNTAINS DR
LAKE WORTH FL 33467-2065
US

3. Date Incorporated or Qualified

02/10/1975

4. FEI Number

59-1570954

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

POULETTE, DEBBIE
4615 FOUNTAINS DR
LAKE WORTH FL 33467

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD ☐ DELETE
NAME RUDWICK, MARVIN
STREET ADDRESS 4355 TREVI COURT
CITY-ST-ZIP LAKE WORTH FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VD ☐ DELETE
NAME STEINBERG, NATHAN
STREET ADDRESS 5279 FOUNTAINS DR S. 205
CITY-ST-ZIP LAKE WORTH FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE VD ☐ DELETE
NAME HOLTZER, BERNARD
STREET ADDRESS 5326 FOUNTAINS DR. S
CITY-ST-ZIP LAKE WORTH FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE PD ☒ DELETE
NAME KRIEGER, HERBERT
STREET ADDRESS 5257 FOUNTAIN DRIVE S., # 705
CITY-ST-ZIP LAKE WORTH FL

4.1 TITLE TD ☐ Change ☒ Addition
4.2 NAME LOUIS ZUCKERMAN
4.3 STREET ADDRESS 6864 PARISIAN WAY
4.4 CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE SD ☐ DELETE
NAME LAMBERT, ROBERT
STREET ADDRESS 4254-102 DE'ESTE COURT
CITY-ST-ZIP LAKE WORTH FL

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE TD ☐ DELETE
NAME MANFORD, BERNARD
STREET ADDRESS 6688 PALERMO WAY
CITY-ST-ZIP LAKE WORTH FL

6.1 TITLE PD ☒ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 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 in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE

Bernard J. Manford

CR2E037 (10/97)