FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 19, 1999 8:00 am
Secretary of State
02-19-1999 90089 040 ****61.25

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DOCUMENT # **752371**

1. Corporation Name

FOUNTAIN LAKE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
5507 FOUNTAIN LAKE CIRCLE APT B102 ——— NON C110 BRADENTON FL 34207	5507 FOUNTAIN LAKE CIRCLE APT B102 ——— NON C110 BRADENTON FL 34207

2. Principal Place of Business 21 NO CHANGE	2a. Mailing Address 26 NO CHANGE	3. Date Incorporated or Qualifed 05/06/1980
Suite, Apt. #, etc. 22 APT C110	Suite, Apt. #, etc. 27 APT C110	4. FEI Number 59-2221850 ☐ Applied For ☐ Not Applicable
City & State 23 NO CHANGE	City & State 28 NO CHANGE	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip / Country 24 NO CHANGE 25	Zip / Country 29 NO CHANGE 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

BAILEY, CRAIG
5503 FOUNTAIN LAKE CIRCLE
APT A108
BRADENTON FL 34207

10. Name and Address of New Registered Agent

81 Name: NO CHANGE
82 Street Address (P.O. Box Number is Not Acceptable): NO CHANGE
83: APT A 105
84 City: NO CHANGE **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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	BAILEY, CRAIG		1.2 NAME	NO CHANGE	
STREET ADDRESS	5503 FOUNTAIN LAKE CIR., #A-108		1.3 STREET ADDRESS	5503 FOUNTAIN LAKE CIR, #A -105	
CITY-ST-ZIP	BRADENTON FL 34207		1.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	DENT, BERNARD K		2.2 NAME		
STREET ADDRESS	743 GARDENWOOD DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	GREENVILLE OH 45331		2.4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	DECKER, CHARLES		3.2 NAME		
STREET ADDRESS	6235 GEORGIA AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34207		3.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	4.1 TITLE		☒ Change ☐ Addition
NAME	POCKEDLY, JAMES		4.2 NAME	[redacted] POCHEDLY, JAMES	
STREET ADDRESS	10932 LIME RIDGE RD		4.3 STREET ADDRESS		
CITY-ST-ZIP	HIRAM OH 44234		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	WOLF, LAVERN		5.2 NAME		
STREET ADDRESS	1 CONN CIR		5.3 STREET ADDRESS		
CITY-ST-ZIP	UNIONTOWN PA 15401		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			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, with all other like empowered.

SIGNATURE: Bernard K Dent PRESIDENT 1/11/99 941-739-8236
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)