2002 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # 768023**

FILED May 06, 2002 8:00 am § Secretary of State

1. Entity Name

FOUNTAINS SOUTH PROPERTY OWNERS ASSOCIATION, INC. 05-06-2002 90271 024 ****61.25 Principal Place of Business Mailing Address 4615 S. FOUNTAINS DR 4615 S. FOUNTAINS DR LAKE WORTH FL 33467 LAKE WORTH FL 33467 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2340750 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent --Name POULETTE, DEBBIE Street Address (P.O. Box Number is Not Acceptable) 4615 S. FOUNTAINS DR. LAKE WORTH FL 33467 City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing S. FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE X Delete TITLE Addition KANTROWITZ, WALTER MANFORD, BERNARD 6688 PAZERMO WAY NAME NAME STREET ADDRESS 5502 FOUNTAINS DRIVE SO. STREET ADDRESS LAKE WORTH, FL 33469 CITY-ST-ZIP LAKE WORTH FL 33467 CITY-ST-ZIP VD TITLE X Delete TITLE V D ☐ Change Addition Kreiger, Herbert KANTROWITZ, WALTER NAME NAME STREET ADDRESS 5257 FOUNTAINS DRIVE SO. #705 5502 FOUNTAINS DR. SO. STREET ADDRESS CITY-ST-ZIP LAKE WORTH FL 33467 LAKE WORTH, FL 33467 CITY-ST-ZIP SD------Delete TITLE MAddition HESSELL, ELAINE WISHNOFF, STANLEY NAME 6816 PARISIAN WAY 6886 FOUNTAINS CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE WORTH FL LAKE WORTH, FL 33467 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition RAUCHMAN, AL NAME NAME STREET ADDRESS 6933 FOUNTAINS CIRCLE STREET ADDRESS CITY-ST-ZIE LAKE WORTH FL 33467 CITY-ST-ZIP TITLE Delete TITLE ☐ Change **★** Addition NAME BILKIS, SONNY NAME 6701 PAZERMO WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE WORTH, FL 33467 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. 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 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CiTY-ST-ZIP

SIGNATURE AND TYPED OR PRINTE

Daytime Phone #

) (6)