2000 UNIFORM BUS	INESS REPO	RT (UBR)	St. FILED
DOCUMENT 3 J43227 1. Entity Name		2	Jul 11, 2000 8:00 ar Secretary of State
FOUNTAIN PROPERTY CORPORATION)N	,	05-24-2000 90086 023 ***150.00
Principal Place of Busings	Mailing Address		-
889 111TH AVEOUE NO TH SUITE 205 NAPLES FL 33900-1805 US	689 NUTU AVENUE NORHT SUITE 205 NAPLES PL 34108-1805 US		
Principal Place of Business 8270–201 College Parkway Suite, Apt. #, etc.	3. Mailing Address 8270–201 Colle Suite, Apt. #, etc.	ge Parkway	DO NOT WRITE IN THIS SPACE
City & State Fort Myers, Florida	City & State Fort Myers, F1	orida	4. FEI Number 59-2746078 Applied For Not Applicable
Zip Country	Zip	Country	5. Certificate of Status Desired See Required
33919 USA 6. Name and Address of Current	33919 - Registered Agent	USA:-	7. Name and Address of New Registered Agent
		Name Mic	hael R. Rubenstein & Associates
WILSON, GEMMA C 889 111TH AVENUE HORTH		Street Addre	ess (P.O. Box Number is Not Acceptable) 0-201 College Parkway
SUITE 205	·		
NAPLES PL 33963	•	City For	t Myers, FL Zin Con 33919
8. The above named entity submits this statement to	or the purpose of changing its re	egistered office or reg	istered agent, or both, in the State of Florida.
SIGNATURE MICHAEL R. PUBER Signature, typed or printed name of registered agent		Chael Registered Agent signature red	quired when reinstating) DATE
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)		FEE IS \$150.00 Fee will be \$550.	
11. OFFICERS AND		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE PD	☐ Dalete	TITLE NAME	☐ Change ☐ Addition
NAME SAVILLE, JOHN D STREET ADDRESS 889 111TH AVE N CITY-ST-ZIP NAPLES FL		OTREET ANNOESE	8270-201 College Parkway Fort Myers, Florida 33919
TITLE D /	☐ Delete	TITLE	☐ Change ☐ Addition
NAME SAVILLÉ, DAVID J STREET ADDRESS 889 111TH AVE N	le	STREET ADDRESS	8270-201 College Parkway Fort Myers, Florida 33919
CITY-ST-ZP NAPLES FL	Delete	CITY-ST-ZIP	Change Addition
NAME WILSON, GEMMA C	ZA, Delete	NAME	- :
STREET ADDRESS 889 111TH AVE N CITY-ST-ZIP NAPLES FL		STREET ADDRESS CITY-ST-ZIP	
TITLE EVT	Delete	TITLÉ NAME	☐ Change ☐ Additio
NAME WILSON, MARK D. STREET ADDRESS 889 111TH AVE N		STREET ADDRESS	
CITY-ST-ZIP NAPLES FL	Delete	CITY-ST-ZIP	☐ Change ☐ Additio
NAME	→ pelac	NAME	
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
TITLE	☐ Delete	TITLE NAME	☐ Change ☐ Additio
STREET ADCRESS .		STREET ADDRESS	
13. I hereby certify that the information supplied with indicated on this report or supplemental report of the christophen has been precised on the control of the christophen has been precised on the christophen has been precised on the christophen has been precised on the christophen has been precised by	h this filing does not qualify for is true and accurate and that m	the exemption stated y signature shall have is required by Chapte	in Section .119.07(3)(i), Florida Statutes. I further certify that the information the same legal effect as if made under oath; that I am an officer or director of 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if
changed, or on an attachment with an address.	with ather like impowered.	-	PA 04/30/00 (941) 489-444
SIGNATURE: SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING OFFICER O		Dire Dayure Proce 1
Michael	R. Rubonslein	√ .	Le January Sun

17.6.2000