

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00620

FILED
Apr 16, 2007
Secretary of State

Entity Name: FOUNTAINS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 W STATE ROAD 434
SUITE #5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 W STATE ROAD 434
SUITE #5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 59-2363272 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HART, JAMES W., JR.
SENTRY MANAGEMENT, INC.
2180 W. STATE RD. 434, SUITE 5000
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GLIGORA, CARMEN
Address: 4448 MIDDLEBROOK RD
City-St-Zip: KISSIMMEE, FL 32811

Title: VPD () Delete
Name: HEITNER, ERIC
Address: 4382 MIDDLEBROOK RD
City-St-Zip: ORLANDO, FL 32811

Title: SD () Delete
Name: RIVERA, GLORIA
Address: 4446 MIDDLEBROOK RD
City-St-Zip: ORLANDO, FL 32811

Title: TD () Delete
Name: BIVONA, RAMONA
Address: 148 FRONT ST
City-St-Zip: NEW HAVEN, CT 06513

Title: D () Delete
Name: KENNEDY, JOE
Address: 4436 MIDDLEBROOK RD
City-St-Zip: ORLANDO, FL 32811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: SHEPHERD, TOM
Address: 4386 MIDDLEBROOK RD
City-St-Zip: KISSIMMEE, FL 32811

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: GLIGORA, CARMEN
Address: 4448 MIDDLEBROOK RD
City-St-Zip: ORLANDO, FL 32811

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: KENNEDY, JOE
Address: 4436 MIDDLEBROOK RD
City-St-Zip: ORLANDO, FL 32811

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOE KENNEDY

PD

04/16/2007

Electronic Signature of Signing Officer or Director

Date