2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# N04000001003

Entity Name: FOUNTAINBLEU PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

409 EAST COLLEGE AVE
RUSKIN, FL 33570

New Principal Place of Business:

Current Mailing Address:

PO BOX 1058
RUSKIN, FL 33575

New Mailing Address:

FEI Number: 54-2144920 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, LOU ELLEN
409 EAST COLLEGE AVE
RUSKIN, FL 33570 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: DP ( ) Delete
Name: ODELL, WILLIAM
Address: 1206 KNIGHTS GATE CT
City-St-Zip: SUN CITY CENTER, FL 33573

Title: DVP ( ) Delete
Name: WARSHOL, JAMES
Address: 1213 KNIGHTS GATE CT
City-St-Zip: SUN CITY CENTER, FL 33573

Title: DST ( ) Delete
Name: MUSGNUG, ROY
Address: 1210 KNIGHTS GATE CT
City-St-Zip: SUN CITY CENTER, FL 33573

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: WARSHOL, JAMES
Address: 1213 KNIGHTS GATE CT
City-St-Zip: SUN CITY CENTER, FL 33573

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

Title: DVP ( ) Change (X) Addition
Name: YABLONSKI, NANCY
Address: 1223 KNIGHTS GATE COURT
City-St-Zip: SUN CITY CENTER, FL 33573

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM ODELL P 04/24/2009

Electronic Signature of Signing Officer or Director — Date