

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001962

FILED
Apr 13, 2006
Secretary of State

Entity Name: THE FOUNTAINS AT COUNTRYSIDE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2500 WINDING CREEK BLVD
CLEARWATER, FL 33761

New Principal Place of Business:

30337 US 19 NORTH SUITE Q
CLEARWATER, FL 33761

Current Mailing Address:

2500 WINDING CREEK BLVD
CLEARWATER, FL 33761

New Mailing Address:

30337 US 19 NORTH SUITE Q
CLEARWATER, FL 33761

FEI Number: 20-2450767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOEHLER, DEBRA
101 EAST KENNEDY BLVD SUITE 3300
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

PMS MANAGEMENT SERVICES INC.
30337 US 19 NORTH SUITE Q
CLEARWATER, FL 33761 US

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: PMS MANAGEMENT SERVICES, INC.

04/13/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KOEHLER, DEBRA
Address: 101 EAST KENNEDY BLVD SUITE 3300
City-St-Zip: TAMPA, FL 33602

Title: VD () Delete
Name: MOREYRA, ROBERT
Address: 101 EAST KENNEDY BLVD SUITE 3300
City-St-Zip: TAMPA, FL 33602

Title: STD () Delete
Name: ROCCA, VINCENT DELLA
Address: 101 EAST KENNEDY BLVD SUITE 3300
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PALMER, BRETT
Address: 2500 WINDING CREEK BLVD. #B208
City-St-Zip: CLEARWATER, FL 33761

Title: SD (X) Change () Addition
Name: PARCELLA, JEAN
Address: 2500 WINDING CREEK BLVD. #H108
City-St-Zip: CLEARWATER, FL 33761

Title: TD (X) Change () Addition
Name: SKEA, WALTER
Address: 2500 WINDING CREEK BLVD. #I104
City-St-Zip: CLEARWATER, FL 33761

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: BRETT PALMER

PD

04/13/2006

Electronic Signature of Signing Officer or Director

Date