

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90199 008 ****70.00

DOCUMENT # N05000006309 1. Entity Name FOUNTAINS AT GOLF PARK, INC.					
Principal Place of Business 150 SE 2ND AVE SUITE 1002 MIAMI, FL 33131			Mailing Address 150 SE 2ND AVE SUITE 1002 MIAMI, FL 33131		
2. Principal Place of Business 2121 N.E. 40TH AVENUE		3. Mailing Address Suite, Apt. #, etc. City & State OCALA, FL			
Suite, Apt. #, etc. 34470		Suite, Apt. #, etc. US		4. FEI Number 20-3019366	
Zip 34470		Country US		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent IBC FIDUCIARY INC. 100 SE 2ND STREET SUITE 2222 MIAMI, FL 33131				7. Name and Address of New Registered Agent Name IBC FIDUCIARY INC. Street Address (P.O. Box Number is Not Acceptable) 100 S.E. 2ND STREET STE. 2222-A City MIAMI FL Zip Code 33131	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE IBC FIDUCIARY INC. 04/28/06 Signature, typed or printed name of registered agent and state if applicable. (NOTE: Registered Agent's signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS SMEJDA, LUCIUS 150 SE 2ND AVE - SUITE 1002 MIAMI, FL 33131	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS SMEJDA, L. 100 S.E. 2ND STREET, STE. 2222-A MIAMI, FL 33131	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS NUH. AL 150 SE 2ND AVE - SUITE 1002 MIAMI, FL 33131	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS NUH, A. 150 S.E. 2ND AVE. STE. 1002 MIAMI, FL 33131	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS SMEJDA, HELLENA 150 SE 2ND AVE - SUITE 1002 MIAMI, FL 33131	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS SMEJDA, H. 2121 N.E. 40TH AVENUE OCALA, FL 34470	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
SIGNATURE: A. Nuh 04/28/06 305 577 9709 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					