

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

APPROVED
AND
FILED


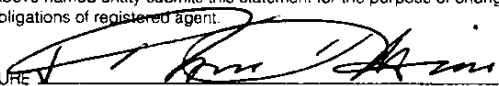
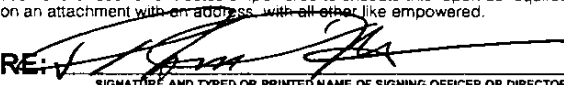
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RY 11-30-07



10292007 Chg-NP CR2E037 (12/06)

DOCUMENT # N05000007180			
1. Entity Name THREE FOUNTAINS OF VIERA CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 6401 BORASCO DRIVE VIERA, FL 32935		Mailing Address 6401 BORASCO DRIVE VIERA, FL 32935	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State MelB., FL.		City & State Melbourne, FL.	
Zip 32940	Country USA	Zip 32940	Country USA
6. Name and Address of Current Registered Agent GARCIA, FERNANDO 2525 PONCE DE LEON BOULEVARD SUITE 400 CORAL GABLES, FL 33134		7. Name and Address of New Registered Agent Name: Clayton & McCulloh Street Address: 2040 STATE RD AIA Ste 201 City: I.H.B. FL 32937	
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: 		DATE: 11-8-2007	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PD GREENWALD, ALLEN 7301 SW 57 COURT #565 SOUTH MIAMI, FL 33143 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	President ORESTES Hernandez 6440 Borasco Dr #1501 MEIB, FL - 32940 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD GREENWALD, SCOTT 7301 SW 57 COURT SUITE 565 SOUTH MIAMI, FL 33143 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice Pres. Bill Rizzoli 6440 Borasco Dr #3524 MEIB, FL 32940 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD CHANNELL, RYAN 7301 SW 57 COURT SUITE 565 SOUTH MIAMI, FL 33143 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Chairman of the Board Tom Harrison 6411 Borasco Dr #317 MEIB, FL 32940 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treas. ANTHONY Filosa 6470 Borasco Dr #2108 MEIB, FL 32940 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Sec Fred Brennan 6451 Borasco Dr #3611 MEIB, FL 32940 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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: 		DATE: 11-8-2007	
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	
THOMAS K. HARRISON		Daytime Phone #	

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