2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007180

FILED Apr 20, 2009 Secretary of State

Entity Name: THREE FOUNTAINS OF VIERA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 6401 BORASCO DRIVE MELBOURNE, FL 32940 **Current Mailing Address: New Mailing Address:** 6401 BORASCO DRIVE MELBOURNE, FL 32940 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **CLAYTON & MCCULLOH** 2040 STATE RD A1A STE #201 I.H.B., FL 32937 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition STEGER, JAKE MOORE, JOHN Name: Name: 6441 BOAASO DR. #3401 Address: 6440 BORASO DR. #3503 Address: MELBOURNE, FL 32940 City-St-Zip: City-St-Zip: MELBOURNE, FL 32940 Title: () Delete Title: (X) Change () Addition RIZKALLAH, BILL Name: RIZKALLAH, BILL Name: Address: 6440 BORASCO DRIVE #3504 Address: 6440 BORASCO DRIVE #3504 City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940 Title: P/CO () Delete Title: SD (X) Change () Addition HARRISON, TOM RIDDELL, ROBERT Name: Name: 6411 BORASCO DR #317 Address: Address: 6451 BORASCO DR #3612 City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940 Title: (X) Delete Title: () Change () Addition Name: FILOSA, ANTHONY Name: 6470 BORASCO DRIVE #2108 Address: Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: Title: (X) Delete Title: () Change () Addition BRENNAN, FRED Name: Name: 6451 BORASCO DRIVE #3611 Address: Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip:

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 RIZKALLAH P 04/20/2009