

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009180

FILED  
Mar 09, 2006  
Secretary of State

Entity Name: THE FOUNTAIN ACADEMY, INCORPORATED

**Current Principal Place of Business:**

157 N DIVISION STREET  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

157 N DIVISION STREET  
OVIEDO, FL 32765

**New Mailing Address:**

FEI Number: 20-4418386

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BLAIR, VICTOR  
2734 WILLOW CREEK DR  
OVIEDO, FL 32765 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: D ( ) Delete  
Name: BLAIR, VICTOR  
Address: 2734 WILLOW CREEK DR  
City-St-Zip: OVIEDO, FL 32765

Title: D ( ) Delete  
Name: PATTERSON, ERIC  
Address: 160 N DIVISION STREET  
City-St-Zip: OVIEDO, FL 32765

Title: D ( ) Delete  
Name: DOUGLAS, MARC  
Address: 5989 AUGUSTA NATIONAL DR #308  
City-St-Zip: ORLANDO, FL 32822

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: REV (X) Change ( ) Addition  
Name: BLAIR, VICTOR  
Address: 2734 WILLOW CREEK DR  
City-St-Zip: OVIEDO, FL 32765

Title: REV (X) Change ( ) Addition  
Name: PATTERSON, ERIC  
Address: 160 N DIVISION STREET  
City-St-Zip: OVIEDO, FL 32765

Title: MR (X) Change ( ) Addition  
Name: DOUGLAS, MARC  
Address: 5775 BENT PINE DRIVE, APT 112  
City-St-Zip: ORLANDO, FL 32822

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: VICTOR BLAIR

REV

03/09/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date