FILED Jan 31, 2007 8:00 am Secretary of State **2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT** 01-31-2007 90030 039 ****61.25 **DOCUMENT # N05991** FOUNTAINS SOUTH VILLAS TWO ASSOCIATION, INC. Principal Place of Business Mailing Address

4615 FOUNTAINS DR 4615 FOUNTAINS DR 40006736

LAKE WORTH, FL 33467 US LAKE WORTH, FL 33467 US														
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Principal Place of Business - No P.O. Box #						<u>-</u>								
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6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name								
POULETTE, DEBBIE														
4615 FOUNTAINS DR LAKE WORTH, FL 33467						Street Addi	Street Address (P.O. Box Number is Not Acceptable)							
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					City					FL	Zip Cod	le		
		submits this statement	for the purp	ose of changing its	register	ed office or re	egistered	agent, or bo	th, in the Stat	te of Flori	da. I am	familiar with,	, and accept	
the obligat	ions of registe	ered agent.												
CICLIATURE														
SIGNATURE .		or printed name of registered ag	ent and title if app	blicable. (NOTE	: Registere	d Agent signature r	required wh	en reinstating)			DATE			
Filing Fee is \$61.25				9. Election Campaign Financing			s	5.00 May E		Ma	ke chec	k payable t	to	
Due by May 1, 2007				Trust Fund Contrit		ion.	J Ă	Added to Fees Florida Department of State					tate	
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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.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Davime Phone #