

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06066

FILED  
Mar 30, 2005  
Secretary of State

**Entity Name:** FOUNTAIN SQUARE OF INVERNESS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3354 EAST GULF TO LAKE HWY.  
INVERNESS, FL 34453 US

**New Principal Place of Business:**

**Current Mailing Address:**

3354 EAST GULF TO LAKE HWY.  
INVERNESS, FL 34453 US

**New Mailing Address:**

**FEI Number:** 59-3086106

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SLAYMAKER, THOMAS E.  
SLAYMAKER AND ASSOC., P.A.  
2250 WEST HIGHWAY 44, SUITE C-1  
INVERNESS, FL 32650 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: PSD ( ) Delete  
Name: KING, PHILIP R.,  
Address: 3354 E. GULF TO LAKE HWY  
City-St-Zip: INVERNESS, FL

Title: VD ( ) Delete  
Name: HANLON, LARRY,  
Address: 3360 E GULF TO LAKE HWY  
City-St-Zip: INVERNESS, FL

Title: D ( ) Delete  
Name: KING, KAREN A  
Address: 3354 E GULF TO LAKE HWY  
City-St-Zip: INVERNESS, FL

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: HANLON, LARRY,  
Address: 3360 E GULF TO LAKE HWY  
City-St-Zip: INVERNESS, FL

Title: VP (X) Change ( ) Addition  
Name: KING, KAREN A.  
Address: 3354 E GULF TO LAKE HWY  
City-St-Zip: INVERNESS, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PHILIP R. KING

PSD

03/30/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date