

FILE NOW: FILING FEE IS \$61.25

FILED

May 01 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # N09923 (6)
1. Corporation Name
FOUNTAINS SOUTH NO. 3 VILLAGE ASSOCIATION, INC.

Principal Place of Business

Mailing Address

4615 FOUNTAINS DR
LAKE WORTH FL 33467-5065
US4615 FOUNTAINS DR
LAKE WORTH FL 33467-4155
US3. Date Incorporated or Qualified
06/24/19853a. Date of Last Report
04/26/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

POULETTE, DEBBIE
4615 FOUNTAINS DR
LAKE WORTH FL 33467

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD ☐ DELETENAME RICHMOND, DAVID
STREET ADDRESS 5301 FOUNTAINS DR, SOUTH, #502
CITY-ST-ZIP LAKE WORTH FL1.1 TITLE D ☒ Change ☐ AdditionTITLE SD ☐ DELETENAME BACALMAN, MORRIS
STREET ADDRESS 5279 FOUNTAINS DR SO #203
CITY-ST-ZIP LAKE WORTH FL1.2 NAME VD ☒ Change ☐ AdditionTITLE PD ☒ DELETENAME KRIEGER, HERBERT
STREET ADDRESS 5257 FOUNTAINS DR S #705
CITY-ST-ZIP LAKE WORTH FL2.1 TITLE SD ☐ Change ☒ AdditionTITLE TSD ☐ DELETENAME KUTZIN, MILTON
STREET ADDRESS 5301 FOUNTAINS DR. SO. #405
CITY-ST-ZIP LAKE WORTH FL2.2 NAME HOWARD SELD ☐ Change ☒ AdditionTITLE D ☐ DELETENAME STEINBERG, NATHAN
STREET ADDRESS 5279 FOUNTAIN DR., S. #205
CITY-ST-ZIP LAKE WORTH FL2.3 STREET ADDRESS 5257-702 FOUNTAINS DR. SO. ☐ Change ☐ AdditionTITLE D ☐ DELETENAME ROTHFARB, SEYMOUR
STREET ADDRESS 5301 FOUNTAINS DR SO #505
CITY-ST-ZIP LAKE WORTH FL3.1 STREET ADDRESS LAKE WORTH, FL 33467 ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/97

Date

561-964-3600

Daytime Phone # 0044018

CR2E037 (9/96)