


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 28, 2008 8:00 am
Secretary of State

05-28-2008 90015 041 ****61.25

DOCUMENT # N14528
 1. Entity Name
FOUNTAINVIEW ESTATES FRIENDSHIP COUNCIL, INC.



Principal Place of Business Mailing Address
FOUNTAINVIEW ESTATE **FOUNTAINVIEW ESTATE**
8800 SHELDON RD **8800 SHELDON RD**
TAMPA FL 33635 **TAMPA FL 33635**
US



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 Zip Country Zip Country

4. FEI Number **06-0197900** Applied For
 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

1st MOORE CR2E037 (10/07)

6. Name and Address of Current Registered Agent
HAZEN, KEITH
9124 BLAIRMOR RD
TAMPA FL 33635

7. Name and Address of New Registered Agent
 Name **ANTONIO MARTINEZ**
 Street Address (P.O. Box Number is Not Acceptable)
9133 MCMILLAN LANE
 City **TAMPA** FL Zip Code **33635**

8. 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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE *Antonio Martinez* DATE **4-24-08**
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature is required when resigning.)

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
T LAFOUNTAIN, ALICE 9117 GROSSE PTE BLVD TAMPA FL 33635	
<input checked="" type="checkbox"/> Delete	
D CAMPBELL, SHARON 9126 BERKSHIRE LN TAMPA FL 33635	
<input type="checkbox"/> Delete	
D MYDLOWSKI, LORETTA 9124 BLAIRMOR RD TAMPA FL 33635	
<input type="checkbox"/> Delete	
D MARTINEZ, MELODY 9133 MCMILLAN LANE TAMPA FL 33635	
<input type="checkbox"/> Delete	
D GAY, ELIZABETH A 9016 NAUTILUS DR TAMPA FL 33635	
<input checked="" type="checkbox"/> Delete	
D MARTINEZ, TONY 9133 MCMILLAN LN TAMPA FL 33635	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D KATE JONES, KATIE 9115 MCMILLAN LANE TAMPA FL 33635	
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
D JONES, GRETCHEN 9113 BLAIR MOOR RD TAMPA FL 33635	
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
D BONIELLO, JEAN 8825 BRYSD DR. TAMPA FL 33635	
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
D MARTUCCI, JUDY 9146 GROSSE PTE BLVD TAMPA, FL 33635	
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
D DIMARTINO, JOSEPHINE 8817 LOCHMOOR RD TAMPA FL 33635	
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
D VARNUM, SUE 9140 MCMILLAN LN 8829 WELLINGTON DR, TAMPA, FL 33635	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE: *Alice Lafountain* **ALICE LAFOUNTAIN**
 April 24, 2008 813 8897322