

2006 NOT-FOR-PROFIT CORPORATION: ANNUAL REPORT

FILED
Mar 31, 2006 8:00 am
Secretary of State

03-31-2006 90009 037 ****61.25

DOCUMENT # N17751

1. Entity Name
FOUNTAINLAKE HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business
7001 TEMPLE TERR HWY
TEMPLE TERR, FL 33637 US

Mailing Address
7001 TEMPLE TERR HWY
TEMPLE TERRACE, FL 33637 US

40041914



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02082006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-2738973

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DUARTE, ANTONIO III
6221 LAND O LAKES BLVD
LAND O LAKES, FL 34639

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DT
NAME FERNANDES, CARLOS ☒ Delete
STREET ADDRESS 12022 STONE CROSSING CIRCLE
CITY-ST-ZIP TAMPA, FL 33635

TITLE DP Hortaridis, Tim ☐ Change ☒ Addition
NAME 12017 Stone Crossing Cir
STREET ADDRESS Tampa FL 33635
CITY-ST-ZIP

TITLE DVP
NAME FERNANDEZ, ALBERT ☐ Delete
STREET ADDRESS 12014 LITTLEBERRY CT
CITY-ST-ZIP TAMPA, FL 33635

TITLE B
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE DS
NAME BECKERMAN, MADELINE ☒ Delete
STREET ADDRESS 12044 STONE CROSSING CIRCLE
CITY-ST-ZIP TAMPA, FL 33635

TITLE DS Fernandes, Margaret ☐ Change ☒ Addition
NAME 12022 Stone Crossing Cir
STREET ADDRESS Tampa, FL 33635
CITY-ST-ZIP

TITLE DP
NAME BENSON, GUDRUN "GUDI" ☐ Delete
STREET ADDRESS 12006 STONE CROSSING CIRCLE
CITY-ST-ZIP TAMPA, FL 33635

TITLE DT
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE:

Tim Hortaridis Tim Hortaridis

Date

Daytime Phone #

3/2/06 813-980-1000