RILED 2001 UNIFORM BUSINESS REPORT (UBR Jun 14, 2001 8:00 am Secretary of State **DOCUMENT #** FOUNTAINVIEW ESTATES HOMEOWNERS 05-01-2001 90108 011 ****61.25 ASSOCIATION, INC. Principal Place of Business Mailion Address Fountainview Estates c/o Don Stough, Vice President 802 Fountainview South lakeland, Fl 33809 2. Principal Place of Business 3. Mailing Address same same Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable · Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of Wir Registered Agent Street Address (P.O. Box Number is Not Acceptable) 95 lt Amond Zip Code 3 よりし 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. SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. President Al Jibb Delete mombor lange □ Change Addition TITLE TITLE Bee HAINNG NAME NAME 1006 Fountainview North Til Loantainview N. STREET ADDRESS STREET ADDRESS CUTY-ST-ZIP CITY-ST-ZIP 23509 AKO & Nmd Vice Fresident Don Stough TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS NIERW IS 03 802 Fountainview South CITY-ST-ZIZ CITY-ST-ZIP Delete Change : TITLE TITLE Addition NAME NAME STREET ADDRESS STREET ADORESS 1110 Fountainview Lake Dr. Lake Dr. 13809 CITY-ST-ZIP CITY-SY-719 Delete □ Change HITE TITLE Addition Treasurer NAME NAME Josie Coluccio 1930e Tomatarnyi gystake Dr. STREET ADDRESS STREET ADDRESS CITY-S(-ZIP CITY-ST-70P Delete TITLE TITLE ☐ Chance ☐ Addition member at large / Max Seymore 721 Fountainview North NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 33809 <u>Lakeland, Fl.</u> TITLE TITLE Change ☐ Addition Member at Large MAME NAME MEAINVILW LK DR. STREET ADDRESS STREET ADDRESS LAKEDAND. CITY-ST-ZIP CITY-ST-ZIP F1 33809 12. I 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 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:

859 3639

11.18-01

Florida Department of State Divisions of Corporations P>O> Box 6327 Tallahassee, Florida 32314

Attn: Katherine Harris, Secretary of State Reference Number N30189

Pleasr be advised we are sending our annual report/uniform business report with the following corrections: Fountainview Estates Homeowners Association, Inc. has only Directors. We do not have Trustees.

.

Sincerely

Kathleen C. Harper, Secretary

enc.

June 5, 2001