

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 10, 2004 8:00 am
Secretary of State

02-10-2004 90016 049 ****61.25

DOCUMENT # N30189			
1. Entity Name FOUNTAINVIEW ESTATES HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business 600 FOUNTAINVIEW SOUTH, SUITE 1 LAKELAND FL 33809-3423		Mailing Address 600 FOUNTAINVIEW SOUTH, SUITE 1 LAKELAND FL 33809-3423	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E037 (11/03)

4. FEI Number 65-0095737		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	
COLLING, LEE J 628 MAITLAND AVENUE ALTAMONTE SPRINGS FL 32701		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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 NAME STREET ADDRESS CITY-ST-ZIP	PD CAMPBELL, FRED 820 FOUNTAINVIEW LAK DR. LAKELAND FL 33809 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPDROLL, Virginia Carroll, Virginia 608 Fountainview South Lakeland, FL 33809 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JAMES, ARTHUR 712 FOUNTAINVIEW SOUTH LAKELAND FL 33809 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LEPPERT, JEANNE 610 FOUNTAINVIEW NORTH LAKELAND FL 33809 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Ballene, Charlene 716 Fountainview Lk. Drive Lakeland, FL 33809 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BLAKLEY, JACKIE 604 FOUNTAINVIEW SOUTH LAKELAND FL 33809 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KIRALY, JOE 1025 FOUNTAINVIEW SOUTH LAKELAND FL 33809 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bowman, Thomas 618 Fountainview Lk. Drive Lakeland, FL 33809 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACOBS, LOUISE 804 FOUNTAINVIEW SOUTH LAKELAND FL 33809 ☐ 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 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: Fred Campbell **Fred Campbell** **2/2/04** **(863) 858-1678**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #