

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005444

FILED
Jan 26, 2011
Secretary of State

Entity Name: OAKMONT AT THE FOUNTAINS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4615 FOUNTAINS DRIVE
STE B
LAKE WORTH, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

4615 FOUNTAINS DRIVE
STE B
LAKE WORTH, FL 33467 US

New Mailing Address:

FEI Number: 65-0566834

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEBBIE POULETTE
4615 FOUNTAINS DRIVE
STE B
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: DOMBROWSKY, NORMAN
Address: 5755 FOUNTAINS DR. SOUTH
City-St-Zip: LAKE WORTH, FL 33467

Title: TD
Name: BEST, STEVEN
Address: 5778 FOUNTAINS DRIVE S
City-St-Zip: LAKE WORTH, F 33467

Title: VD
Name: JACOBS, GEORGE
Address: 5574 FOUNTAINS DR S
City-St-Zip: LAKE WORTH, FL 33467

Title: SD
Name: LEVIN, ARMAND
Address: 5532 FOUNTAINS DRIVE SOUTH
City-St-Zip: LAKE WORTH, FL 33467

Title: VD
Name: COHEN, WALTER
Address: 5695 FOUNTAINS DR S
City-St-Zip: LAKE WORTH, FL 33467

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: NORMAN DOMBROWSKY

P

01/26/2011

Electronic Signature of Signing Officer or Director

Date