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2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 08, 2001 8:00 am
Secretary of State
05-11-2001 90295 025 ****61.25

DOCUMENT # N99000006101

1. Entity Name

FOUNTAINS OF LIVING, INC.

Principal Place of Business	Mailing Address
P.O. BOX 1204 TAVERNIER FL 33070	P.O. BOX 1204 TAVERNIER FL 33070

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0954118 ☐ 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
PATTERSON, URBAN J.W. 82681 OVERSEAS HWY. ISLAMORADA FL 33036	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.

SIGNATURE: Elayne Versage, Director
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PS VERSAGE, ELAYNE 119 HARBOR VIEW DR TAVERNIER FL 33070	☐ Delete	VERSAGE, ELAYNE 119 HARBOR VIEW DR. TAVERNIER, FL. 33070	☒ Change ☐ Addition EXEC. DIR
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP VERSAGE, PETER 119 HARBOR VIEW DR TAVERNIER FL 33070	☐ Delete	VERSAGE, PETER 119 HARBOR VIEW DR. TAVERNIER, FL. 33070	☒ Change ☐ Addition PRESIDENT D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T DUBOSE, STEVE 144 CORAL AVE TAVERNIER FL 33070	☐ Delete	DuBOSE, STEVE 144 CORAL AVE. TAVERNIER, FL. 33070	☐ Change ☐ Addition V. PRES. D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROGERS, BARBARA 17274 BOCA CLUB BOCA RATON FL 33487	☒ Delete Resigned	ANN FEUERMAN 141 PALERMO DR. ISLAMARADA, FL. 33036	☐ Change ☒ Addition D. TREAS.
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COLEMAN, IOLA 54 SHORELAND DR KEY LARGO FL 33037	☒ Delete Deceased	MARIAN SIMON 163 HIBISCUS TAVERNIER, FL. 33070	☐ Change ☒ Addition SEC'Y/D.
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (10/00)

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: Elayne Versage, Director 4-26-01 (305) 852-560
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #