

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000089917

FILED  
Feb 24, 2009  
Secretary of State

Entity Name: FOUNTAINS MANAGEMENT, INC.

## Current Principal Place of Business:

4910 - 14TH ST. W.  
SUITE 300  
BRADENTON, FL 34207

## New Principal Place of Business:

## Current Mailing Address:

4910 - 14TH ST. W.  
SUITE 300  
BRADENTON, FL 34207

## New Mailing Address:

FEI Number: 20-0154712      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOLLIFIELD, BRIAN  
4910 - 14TH STREET W.  
SUITE 300  
BRADENTON, FL 34207 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HOLLIFIELD, ROBERT  
Address: 206 A 66 STREET  
City-St-Zip: HOLMES BEACH, FL 34217

Title: V ( ) Delete  
Name: COPEMAN, CRAIG  
Address: 527 77TH ST  
City-St-Zip: HOLMES BCH, FL 34217

Title: S ( ) Delete  
Name: HOLLIFIELD, SUSAN  
Address: 206 A 66 STREET  
City-St-Zip: HOLMES BEACH, FL 34217

Title: T ( ) Delete  
Name: COPEMAN, NANCY  
Address: 527 77TH ST  
City-St-Zip: HOLMES BCH, FL 34217

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HOLLIFIELD, ROBERT  
Address: 4910 14 STREET WEST SUITE 300  
City-St-Zip: BRADENTON, FL 34207

Title: V (X) Change ( ) Addition  
Name: COPEMAN, CRAIG  
Address: 4910 14 STREET WEST SUITE 300  
City-St-Zip: BRADENTON, FL 34207

Title: S (X) Change ( ) Addition  
Name: HOLLIFIELD, SUSAN  
Address: 4910 14 STREET WEST SUITE 300  
City-St-Zip: BRADENTON, FL 34207

Title: T (X) Change ( ) Addition  
Name: COPEMAN, NANCY  
Address: 4910 14 STREET WEST SUITE 300  
City-St-Zip: BRADENTON, FL 34207

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN HOLLIFIELD

RA

02/24/2009

Electronic Signature of Signing Officer or Director

Date