2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #

S33243

1. Entity Name

FOUNTAIN SQUARE PROPERTY MANAGEMENT, INC.



Principal Place of Business

450 E. LAS OLAS BLVD

Mailing Address

450 E. LAS OLAS BLVD

STE 1500 FT LAUDERDALE FL 33301		STE 1500 FT LAUDERDALE FL 33301		
2. Principal Place	of Business	3. Mailing Address	S	
Suite, Apt. #, etc.		Suite, Apt. #, eti	c.	
City & State		City & State		
Zip	Country	Zip	Country	

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

FILED May 02, 2003 8:00 am Secretary of State

05-02-2003 90422 006 ***150.00



DATE

AMERICAN INFORMATION SERVICES INC.

ONE SE THIRD AVE 27TH FLOOR MIAMI FL 33131, $_{\rm SX}$ \sim

SIGNATURE

Street Address (P.O. Box Number is Not Acceptable)

	City	FL	Zip Code
tere	d office or registered agent, or both, in the State of Florida.	I am fan	niliar with, and accept

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 tamiliar with, and accept
the obligations of registered agent.	

(NOTE: Registered Agent signature required when reinstating)

Name

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

IU.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TI		
TITLE	PS	☐ Delete	TITLE		☐ Change	☐ Addition
NAME	Huizenga, H. Wayne Jr		NAME			
STREET ADDRESS	450 E. LAS OLAS BLVD., STE 1500		STREET ADDRESS			J
CITY-ST-ZIP	FT LAUDERDALE FL 33301		CITY-ST-ZIP			
TITLE	VĪ	Delete	TITLE		☐ Change	☐ Addition
NAME	BRANDEN, CRIS V		NAME			i
STREET ADDRESS	450 E. LAS OLAS BLVD., STE 1500		STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL 33301		CITY-ST-ZIP			Ì
TITLE	VPAS	☐ Delete	TITLE	VPAS HANDLEY RICHARDL	Change	☐ Addition
NAME	HUNDLEY, RICHARD L		NAME	HANDLEY RICHARDL		
STREET ADDRESS	450 E. LAS OLAS BLVD., STE 1500		STREET ADDRESS	Hayrage J. Lyrain, P.		
CITY-ST-ZIP	FT LAUDERDALE FL 33301		CITY-ST-ZIP			
TITLE	•	☐ Delete	TITLE		☐ Change	Addition
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			ļ
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change	☐ Addition
NAME			NAME			ì
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change	☐ Addition
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			

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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the rece changed, or on an attachme

CITY-ST-7IP

SIGNATURE:

CITY-ST-ZIP