DOCUMENT# 707384			May 13, 2	
Entity Name: FOUNTAINVIEW ASSOCIATION, INC. #4, A CONDOMINIUM			UM Secretary of 644992739	
998 NE 167 ST	cipal Place of Business: BEACH, FL 33162		644992739	400
Current Mai	ling Address:			
998 NE 167 NORTH MIA	ST MI BEACH, FL 33162 US			
FEI Number: 59-1159535 Certificat		Certificate of Status Desired	ate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
KALAM, SHAHA 998 NE 167 ST NORTH MIAMI	NB BEACH, FL 33162 US			
The above named	entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Florida.	
	entity submits this statement for the purpose of changing its regist SHAHAB KALAM	tered office or regist	-	/13/2021
		tered office or regis	-	/13/2021 Date
	: SHAHAB KALAM Electronic Signature of Registered Agent	tered office or regisi	-	
SIGNATURE	: SHAHAB KALAM Electronic Signature of Registered Agent	tered office or regisi	-	
SIGNATURE	: SHAHAB KALAM Electronic Signature of Registered Agent		05	
SIGNATURE Officer/Direc Title	SHAHAB KALAM Electronic Signature of Registered Agent Ctor Detail : P	Title	т	
SIGNATURE Officer/Direc Title Name	Electronic Signature of Registered Agent Ctor Detail : P KALAM, SHAHAB 998 NE 167 ST	Title Name	T BANDAO, JOYCE	
SIGNATURE Officer/Direc Title Name Address	Electronic Signature of Registered Agent Ctor Detail : P KALAM, SHAHAB 998 NE 167 ST	Title Name Address	T BANDAO, JOYCE 1460 NE 169 ST., #307	
SIGNATURE Officer/Direc Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Ctor Detail : P KALAM, SHAHAB 998 NE 167 ST NORTH MIAMI BEACH FL 33162	Title Name Address City-State-Zip:	T BANDAO, JOYCE 1460 NE 169 ST., #307 NORTH MIAMI BEACH FL 33162	
SIGNATURE Officer/Direc Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Ctor Detail : P KALAM, SHAHAB 998 NE 167 ST NORTH MIAMI BEACH FL 33162 VP	Title Name Address City-State-Zip: Title	T BANDAO, JOYCE 1460 NE 169 ST., #307 NORTH MIAMI BEACH FL 33162 OFFICER	

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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: KALAM, SHAHAB

OFFICER

101 City-State-Zip: NMB FL 33162

SUERO, LUIS OFFICER

1460 NE 169 STR

Title

Name

Address

PRESIDENT

05/13/2021 Date

Electronic Signature of Signing Officer/Director Detail

FILED