2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09923

Entity Name: FOUNTAINS SOUTH NO. 3 VILLAGE ASSOCIATION, INC.

FILED Mar 27, 2025 **Secretary of State** 0819706889CC

Current Principal Place of Business:

4615 FOUNTAINS DR

SUITE B

LAKE WORTH, FL 33467

Current Mailing Address:

4615 FOUNTAINS DR

SUITE B

LAKE WORTH, FL 33467 US

FEI Number: 59-2519203 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSENBAUM PLLC 1700 PALM BEACH LAKES BLVD. SUITE 600 WEST PALM BEACH, FL 33401 US

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: STEVEN BRATEN 03/27/2025

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

602

Title D. PRESIDENT Title D, TREASURER Name ENGLISH, JACK Name GARDNER, ALAN

5279 FOUNTAINS DR SO, APT #201 5257 FOUNTAINS DR SO #204 Address Address

City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR Title

Name TEICH, LYNNE SNYDER, STEVE Name

Address 5301 FOUNTAINS DR S #701 5279 FOUNTAINS DR S #304 Address City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467

Title VР **DIRECTOR** Title

Name EMENHEISER, TRISH Name WITTERMAN, BRUCE

Address 5279 FOUNTAINS DRIVE SOUTH Address 5301 FOUNTAINS DRIVE S.

APT. 705 # 204

LAKE WORTH FL 33467 City-State-Zip: City-State-Zip: LAKE WORTH FL 33467

Title **DIRECTOR** Title **DIRECTOR**

Name MONTALTO, PETER HERNANDEZ, RICARDO Name

Address 5257 FOUNTAINS DRIVE SOUTH 5301 FOUNTAINS DRIVE S Address 401

LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467 City-State-Zip:

Continues on page 2

03/27/2025 SIGNATURE: JACK ENGLISH **PRESIDENT**

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.

Officer/Director Detail Continued:

Title SECRETARY

Name REIN, DEBORA KANE

Address 5257 FOUNTAINS DRIVE S

104

City-State-Zip: LAKE WORTH FL 33467