

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30189

Entity Name: FOUNTAINVIEW ESTATES HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**600 FOUNTAINVIEW SOUTH
SUITE 1
LAKELAND, FL 33809-3423**Current Mailing Address:**715 FOUNTAINVIEW LAKE DRIVE
LAKELAND, FL 33809 US**FEI Number:** 65-0095737**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BEARD, LIBBY
1224 DAUGHTERY RD W
LAKELAND, FL 33810 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:** LIBBY BEARD

05/06/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name JUDY, RAMSEY
Address 715 FOUNTAINVIEW LAKE DR.
City-State-Zip: LAKELAND FL 33809

Title VP
Name MASTRANGELO, PETER
Address 715 FOUNTAINVIEW SOUTH
City-State-Zip: LAKELAND FL 33809

Title T
Name DUDLEY, BARBARA
Address 1118 FOUNTAINVIEW LAKE DR.
City-State-Zip: LAKELAND FL 33809

Title S
Name ANDERSON, MARTHA
Address 606 FOUNTAINVIEW NORTH
City-State-Zip: LAKELAND FL 33809

Title D
Name ANDERSON, MELINDA
Address 813 FOUNTAINVIEW LAKE
City-State-Zip: LAKELAND FL 33809

Title D
Name PAYNTER, ODESSA
Address 812 FOUNTAINVIEW SOUTH
City-State-Zip: LAKELAND FL 33809

Title DIRECTOR
Name GREEN, CHRIS
Address 815 FOUNTAINVIEW SOUTH
City-State-Zip: LAKELAND FL 33809

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: JUDY RAMSEY

PRESIDENT

05/06/2020

Electronic Signature of Signing Officer/Director Detail

Date