FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAR 17 AM 7:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DO NOT WRITE IN THIS SPACE

DOCUMENT # 728860 (8)

1. Corporation Name
PALM-AIRE COUNTRY CLUB CONDOMINIUM ASSOCIATION N O. 5, INC.

Principal Place of Business	Mailing Address
3500 GATEWAY DRIVE POMPANO BEACH FL 33069	3500 GATEWAY DRIVE POMPANO BEACH FL 33069

3. Date Incorporated or Qualified: 02/18/1974
3a. Date of Last Report: 04/25/1994
4. FEI Number: 59-1565183 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
1280 S.W. 36th Avenue • Suite #301
Pompano Beach, Florida 33069

2a. Mailing Address
1280 S.W. 36th Avenue • Suite #301
Pompano Beach, Florida 33069

Zip / Country: Zip / Country

9. Name and Address of Current Registered Agent
SHERMAN, DR. LEONARD
1280 S.W. 36th Avenue • Suite #301
Pompano Beach, Florida 33069

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS FLAX, PASHA 1280 S.W. 36th Avenue • Suite #301 Pompano Beach, Florida 33069	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROSENTHAL, JACK 1280 S.W. 36th Avenue • Suite #301 Pompano Beach, Florida 33069	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GOLDSTEIN, MAX 1280 S.W. 36th Avenue • Suite #301 Pompano Beach, Florida 33069	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition T.S. 3/17/95
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SHAPIRO, HARRY 1280 S.W. 36th Avenue • Suite #301 Pompano Beach, Florida 33069	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☒ Change ☐ Addition D Harry Shapiro 1280 S.W. 36th Avenue • Suite #301 Pompano Beach, Florida 33069
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WURTZEL, HERBERT 1280 S.W. 36th Avenue • Suite #301 Pompano Beach, Florida 33069	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	PD ☒ Change ☐ Addition Sherman, Dr. Leonard 1280 S.W. 36th Avenue • Suite #301 Pompano Beach, Florida 33069
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ATD SICLARE, JOSEPH 1280 S.W. 36th Avenue • Suite #301 Pompano Beach, Florida 33069	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	T/D ☐ Change ☐ Addition Joseph Siclare 1280 S.W. 36th Avenue • Suite #301 Pompano Beach, Florida 33069

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Leonard Sherman 3/20/95 - 305-969-1330
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000888