

FILED
Sep 06, 2001 8:00 am
Secretary of State

08-14-2001 90008 025 ****61.25

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 736371

1. Entity Name

PALM-AIRE COUNTRY CLUB CONDOMINIUM ASSOCIATION N

Principal Place of Business

Mailing Address

3500 GATEWAY DR.
POMPANO BEACH FL 33069-3005

3500 GATEWAY DR.
POMPANO BEACH FL 33069-3005

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1702482

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STRAUSS, HAROLD
3500 GATEWAY DR #202
POMPANO BEACH FL 33069

Name

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

City

FL

Zip Code

8. 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

Harold Strauss Harold STRAUSS 8801

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T
TITLE NAME EPSTEEN, EARL Delete
STREET ADDRESS 3500 GATEWAY DR. #202
CITY-ST-ZIP POMPANO BEACH FL 33069

D
TITLE NAME ARMANDO FUENTES Change Addition
STREET ADDRESS 3500 GATEWAY DRIVE #202
CITY-ST-ZIP POMPANO BEACH, FL 33069

PD
TITLE NAME STRAUSS, HAROLD Delete
STREET ADDRESS 3500 GATEWAY DR. #202
CITY-ST-ZIP POMPANO BEACH FL 33069

Change Addition

VP
TITLE NAME LAMBERG, MAURY Delete
STREET ADDRESS 3500 GATEWAY DR #202
CITY-ST-ZIP POMPANO BEACH FL 33069

Change Addition

DS
TITLE NAME ASSAEL, AL Delete
STREET ADDRESS 3500 GATEWAY DR #202
CITY-ST-ZIP POMPANO BCH FL

T Change Addition

~~S~~
TITLE NAME ~~EVELYN NEWMAN~~ Delete
STREET ADDRESS
CITY-ST-ZIP

S
TITLE NAME EVELYN NEWMAN Change Addition
STREET ADDRESS 3500 GATEWAY DRIVE #202
CITY-ST-ZIP POMPANO BEACH, FL 33069

Delete

D
TITLE NAME JERRY PODOLSKY Change Addition
STREET ADDRESS 3500 GATEWAY DR #202
CITY-ST-ZIP POMPANO BEACH, FL 33069

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Harold Strauss Harold STRAUSS 8801

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/01)