


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2008 8:00 am
Secretary of State

02-14-2008 90019 035 ****61.25

DOCUMENT # 736371 1. Entity Name PALM-AIRE COUNTRY CLUB CONDOMINIUM ASSOCIATION NO. 7, INC.	
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Principal Place of Business 3500 GATEWAY DR. POMPANO BEACH, FL 33069-3005	Mailing Address 3500 GATEWAY DR. POMPANO BEACH, FL 33069-3005
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40024740



01042008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-1702482	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

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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. I am familiar with, and accept the obligations of registered agent.

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

**Filing Fee is \$61.25
 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	STEWART, FLOYD
STREET ADDRESS	3500 GATEWAY DR. #202 <i>Delete</i>
CITY-ST-ZIP	POMPANO BEACH, FL 33069
TITLE	PD
NAME	STRAUSS, HAROLD
STREET ADDRESS	3500 GATEWAY DR. #202
CITY-ST-ZIP	POMPANO BEACH, FL 33069
TITLE	ST
NAME	NEWMAN, EVELYN
STREET ADDRESS	4031 N. CYPRESS DRIVE #105
CITY-ST-ZIP	POMPANO BEACH, FL 33069
TITLE	VP
NAME	AL ASSAEL
STREET ADDRESS	3500 Gateway Drive #202
CITY-ST-ZIP	Pompamo Beach, FL 33069
TITLE	SAN FORD GATPHEIN (Treasurer)
NAME	
STREET ADDRESS	3500 Gateway Drive #202
CITY-ST-ZIP	Pompamo Beach, FL 33069
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Pres* *2-7-08*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #