

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 728860

**FILED**  
**Mar 09, 2021**  
**Secretary of State**  
**1223346988CC**

**Entity Name:** PALM-AIRE COUNTRY CLUB CONDOMINIUM ASSOCIATION  
NO. 5, INC.

**Current Principal Place of Business:**

C/O EXCLUSIVE PROPERTY MANAGEMENT  
2945 WEST CYPRESS CREEK ROAD # 201  
FT. LAUDERDALE, FL 33309

**Current Mailing Address:**

C/O EXCLUSIVE PROPERTY MANAGEMENT  
2945 WEST CYPRESS CREEK ROAD # 201  
FT. LAUDERDALE, FL 33309

**FEI Number: 59-1565183****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**

LANDOL LAW FIRM, PA  
2101 NW CORPORATE BLVD., SUITE 410  
BOCA RATON, FL 33431 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name O'GRADY, TIM  
Address C/O EXCLUSIVE PROPERTY  
MANAGEMENT  
2945 WEST CYPRESS CREEK RD 201

City-State-Zip: FT. LAUDERDALE FL 33309

Title TREASURER  
Name LINER, STEPHEN  
Address C/O EXCLUSIVE PROPERTY  
MANAGEMENT  
2945 WEST CYPRESS CREEK RD 201

City-State-Zip: FT. LAUDERDALE FL 33309

Title DIRECTOR  
Name DURANT, MICHELLE  
Address C/O EXCLUSIVE PROPERTY  
MANAGEMENT  
2945 WEST CYPRESS CREEK RD 201

City-State-Zip: FT. LAUDERDALE FL 33309

Title PRESIDENT  
Name INZINNA, ROSE  
Address C/O EXCLUSIVE PROPERTY  
MANAGEMENT  
2945 WEST CYPRESS CREEK RD 201

City-State-Zip: FT. LAUDERDALE FL 33309

Title SECRETARY  
Name PHILLIPS, BARBARA  
Address C/O EXCLUSIVE PROPERTY  
MANAGEMENT  
2945 WEST CYPRESS CREEK RD 201

City-State-Zip: FT. LAUDERDALE FL 33309

*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: ROSE INZINNA****PRESIDENT****03/09/2021**

Electronic Signature of Signing Officer/Director Detail

Date