2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 736371

Entity Name: PALM-AIRE COUNTRY CLUB CONDOMINIUM ASSOCIATION

NO. 7, INC.

Current Principal Place of Business:

C/O M&M PROPERTY MANAGEMENT 1280 SW 36 AVENUE STE. 305 POMPANO BEACH, FL 33069

Current Mailing Address:

C/O M&M PROPERTY MANAGEMENT 1280 SW 36 AVENUE STE, 305 POMPANO BEACH, FL 33069 US

FEI Number: 59-1702482 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

MIRZA BASULTO & ROBBINS, LLP 14160 NW 77 COURT STE, 22 MIAMI LAKES, FL 33016 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: RUSSELL M. ROBBINS, ESQ. 08/20/2015

> Date Electronic Signature of Registered Agent

Officer/Director Detail :

Title **DIRECTOR** Title DIRECTOR EIDINGER, CHRISTOPHER Name ASSAEL, AL Name

3500 GATEWAY DRIVE #202 Address Address 3500 GATEWAY DR. #202 City-State-Zip: POMPANO BEACH FL 33069 City-State-Zip: POMPANO BEACH FL 33069

Title **PRESIDENT** Title DIRECTOR

Name GASPARINI, GRAZIANO GALINKIN, SANDY Name

Address 3500 GATEWAY DR. 3500 GATEWAY DR. Address SUITE 202

SUITE 202

City-State-Zip: POMPANO BEACH FL 33069 POMPANO BEACH FL 33069 City-State-Zip:

Title **SECRETARY** Title DIRECTOR Name JENSEN, JACK Name HOOK, PAUL

3500 GATEWAY DR. 3500 GATEWAY DR. Address Address

SUITE 202 SUITE 202

POMPANO BEACH FL 33069 POMPANO BEACH FL 33069 City-State-Zip: City-State-Zip:

٧P Title Title TREASURER

LATUFF, ANIBAL Name FUENTES, ARMANDO Name Address 3500 GATEWAY DR. Address 3500 GATEWAY DR.

SUITE 202 SUITE 202

POMPANO BEACH FL 33069 City-State-Zip: POMPANO BEACH FL 33069 City-State-Zip:

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08/20/2015 SIGNATURE: GRAZIANO GASPARINI PRESIDENT

FILED Aug 20, 2015 Secretary of State CC0076468381

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.

Officer/Director Detail Continued:

Title DIRECTOR

Name ALVES, MAFALDA Address 3500 GATEWAY DR.

SUITE 202

City-State-Zip: POMPANO BEACH FL 33069