

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736371

FILED
Mar 17, 2015
Secretary of State
CC7289830881

Entity Name: PALM-AIRE COUNTRY CLUB CONDOMINIUM ASSOCIATION
NO. 7, INC.

Current Principal Place of Business:

3500 GATEWAY DR.
SUITE 202
POMPANO BEACH, FL 33069

Current Mailing Address:

3500 GATEWAY DR.
SUITE 202
POMPANO BEACH, FL 33069 US

FEI Number: 59-1702482

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GASPRINI, GRAZIANO
3500 GATEWAY DR #202
POMPANO BEACH, FL 33069 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: GRAZIANO GASPRINI

03/17/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name EIDINGER, CHRISTOPHER
Address 3500 GATEWAY DRIVE #202
City-State-Zip: POMPANO BEACH FL 33069

Title DIRECTOR
Name ASSAEL, AL
Address 3500 GATEWAY DR. #202
City-State-Zip: POMPANO BEACH FL 33069

Title DIRECTOR
Name GALINKIN, SANDY
Address 3500 GATEWAY DR.
SUITE 202
City-State-Zip: POMPANO BEACH FL 33069

Title PRESIDENT
Name GASPRINI, GRAZIANO
Address 3500 GATEWAY DR.
SUITE 202
City-State-Zip: POMPANO BEACH FL 33069

Title DIRECTOR
Name HOOK, PAUL
Address 3500 GATEWAY DR.
SUITE 202
City-State-Zip: POMPANO BEACH FL 33069

Title SECRETARY
Name JENSEN, JACK
Address 3500 GATEWAY DR.
SUITE 202
City-State-Zip: POMPANO BEACH FL 33069

Title TREASURER
Name LATUFF, ANIBAL
Address 3500 GATEWAY DR.
SUITE 202
City-State-Zip: POMPANO BEACH FL 33069

Title VP
Name FUENTES, ARMANDO
Address 3500 GATEWAY DR.
SUITE 202
City-State-Zip: POMPANO BEACH FL 33069

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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: GRAZIANO GASPRINI

PRESIDENT

03/17/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ALVES, MAFALDA
Address 3500 GATEWAY DR.
 SUITE 202
City-State-Zip: POMPANO BEACH FL 33069