

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 741597

**FILED**  
**Mar 20, 2015**  
**Secretary of State**  
**CC8289985956****Entity Name:** PALM-AIRE COUNTRY CLUB CONDOMINIUM ASSOCIATION  
NO. 9, INC.**Current Principal Place of Business:**CAMPBELL PROPERTY MANAGEMENT  
3500 GATEWAY DRIVE SUITE 202  
POMPANO BEACH, FL 33069**Current Mailing Address:**CAMPBELL PROPERTY MANAGEMENT  
3500 GATEWAY DRIVE SUITE 202  
POMPANO BEACH, FL 33069 US**FEI Number: 59-1823918****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**IRWIN ROSEN  
CAMPBELL PROPERTY MANAGEMENT  
3500 GATEWAY DRIVE SUITE 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P
Name	ROSEN, IRWIN
Address	CAMPBELL PROPERTY MANAGEMENT 3500 GATEWAY DRIVE SUITE 202
City-State-Zip:	POMPANO BEACH FL 33069

Title	VP
Name	MOSS, BARRY
Address	CAMPBELL PROPERTY MANAGEMENT 3500 GATEWAY DRIVE SUITE 202
City-State-Zip:	POMPANO BEACH FL 33069

Title	T
Name	SABANOSH, KEN
Address	CAMPBELL PROPERTY MANAGEMENT 3500 GATEWAY DRIVE SUITE 202
City-State-Zip:	POMPANO BEACH FL 33069

Title	S
Name	CORSO, DAVID
Address	CAMPBELL PROPERTY MANAGEMENT 3500 GATEWAY DRIVE SUITE 202
City-State-Zip:	POMPANO BEACH FL 33069

Title	D
Name	KEMBER, HARRY
Address	CAMPBELL PROPERTY MANAGEMENT 3500 GATEWAY DRIVE SUITE 202
City-State-Zip:	POMPANO BEACH FL 33069

Title	DIRECTOR
Name	ZUCKERMAN, STEWART
Address	CAMPBELL PROPERTY MANAGEMENT 3500 GATEWAY DRIVE SUITE 202
City-State-Zip:	POMPANO BEACH FL 33069

Title	DIRECTOR
Name	RITTER, AL
Address	CAMPBELL PROPERTY MANAGEMENT 3500 GATEWAY DRIVE SUITE 202
City-State-Zip:	POMPANO BEACH FL 33069

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: IRWIN ROSEN****PRESIDENT****03/20/2015**

