

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006852

Entity Name: PALM AIRE UNITED, INC.**Current Principal Place of Business:**3200 N COURSE LANE
APT. 213
POMPANO BEACH, FL 33069**Current Mailing Address:**PO BOX 669054
POMPANO BEACH, FL 33066-9054 US**FEI Number:** 61-1602165**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DION, EDWARD A
208 S.E. 6TH STREET
FORT LAUDERDALE, FL 33301 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 PRESIDENT
Name CORSON, LEE
Address 4112 PALM AIRE DRIVE WEST, #123 B
City-State-Zip: POMPANO BEACH FL 33069

Title TREASURER
Name SMITH, DARLENE
Address 3200 N COURSE LANE
 #213
City-State-Zip: POMPANO BEACH FL 33069

Title VP
Name MOSS, BARRY
Address 805 CYPRESS BLVD
 APT 403
City-State-Zip: POMPANO BEACH FL 33069

Title DIRECTOR
Name SCHWARTZ, STU
Address PO BOX 669054
City-State-Zip: POMPANO BEACH FL 33066-9054

Title SECRETARY
Name WILSON, JEANIE
Address 616 GARDENS DRIVE
 #101
City-State-Zip: POMPANO BEACH FL 33069

Title DIRECTOR
Name ADAM, RUSSELL
Address 4015 W PALM AIRE DRIVE
 APT 203
City-State-Zip: POMPANO BEACH FL 33069

Title DIRECTOR
Name FERRIS, GENE
Address PO BOX 669054
City-State-Zip: POMPANO BEACH FL 33066-9054

Title DIRECTOR
Name COHEN, JAY
Address PO BOX 669054
City-State-Zip: POMPANO BEACH FL 33066-9054

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: DARLENE SMITH

TREASURER

01/18/2023

Electronic Signature of Signing Officer/Director Detail

Date