

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

2

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90051 032 ****61.25

DOCUMENT # 712186

1. Entity Name

**PALM-AIRE COUNTRY CLUB APARTMENTS
CONDOMINIUM, INC.**



Principal Place of Business

**3500 GATEWAY DRIVE
POMPANO BEACH FL 33069**

Mailing Address

**3500 GATEWAY DRIVE
POMPANO BEACH FL 33069**

HUSU (10) 4 50016619

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1161677

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIEGEL, EVELYN
GEORGE J. CUOLAHAN
C/O M.W.I.
3500 GATEWAY DR., STE 202
POMPANO BCH FL 33069

Name

GEORGE J. CUOLAHAN

Street Address (P.O. Box Number is Not Acceptable)

C/O M.W.I.

3500 GATEWAY DR. STE 202

City

POMPANO BEACH

FL

Zip Code

33069

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

George J. Cuolahan

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SIEGEL, EVELYN	
STREET ADDRESS	3500 GATEWAY DR	
CITY- ST- ZIP	POMPANO BEACH FL 33069	
TITLE	P	<input type="checkbox"/> Delete
NAME	COOLAHAN, GEORGE	
STREET ADDRESS	3500 GATEWAY DR. #202	
CITY- ST- ZIP	POMPANO BEACH FL 33069	
TITLE	TD	<input type="checkbox"/> Delete
NAME	LAMPERT, MARVIN	
STREET ADDRESS	3500 GATEWAY DR. #202	
CITY- ST- ZIP	POMPANO BEACH FL 33069	
TITLE	SD	<input type="checkbox"/> Delete
NAME	STECKLER, BURTON	
STREET ADDRESS	3500 GATEWAY DR. #202	
CITY- ST- ZIP	POMPANO BEACH FL 33069	
TITLE	VD	<input type="checkbox"/> Delete
NAME	PLAGER, LOUISE	
STREET ADDRESS	3500 GATEWAY DR #202	
CITY- ST- ZIP	POMPANO BEACH FL 33069	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CUOLAHAN, GEORGE	
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

George J. Cuolahan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-8-05 9549681481

Date

Telephone #