

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 09, 2006 08:00 AM
Secretary of State

DOCUMENT # 736150 1. Entity Name PALM AIRE CIVIC ASSOCIATION, INC.					
Principal Place of Business 905 CYPRESS GROVE DR POMPANO BCH, FL 33069			Mailing Address PALM-AIRE CIVIC ASSOCIATION PO BOX 667492 POMPANO BCH, FL 33069		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2341704 ☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				1st MOURE CR2E037 (10/05)	
6. Name and Address of Current Registered Agent SCHEER, HAROLD 905 CYPRESS GROVE DRIVE POMPANO BEACH FL 33069			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ 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, 2006		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 NAME STREET ADDRESS CITY-ST-ZIP	D ASSAEL, ALBERT 1007 E 1 CYPRESS DR POMPANO BEACH FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MINTZ, ABE 3091 NORTH COURSE DRIVE #5-10 POMPANO BEACH FL 33069	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add 000000460685 03/20/06-80020-001 61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHEER, HAROLD 905 CYPRESS GROVE DRIVE POMPANO BEACH FL 33069	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CUOLAHAN, GEORGE J 3150 N. PALM AIRE DR. 10-305 POMPANO BEACH FL 33069	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAUMMER, GEORGE 4000 N CYPRESS DR #105 POMPANO BEACH FL 33069	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RITTER, AL 806 CYPRESS BLVD #204 POMPANO BEACH FL 33069	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *George J. Cuolahan* **GEORGE J. CUOLAHAN** 3-3-06