

8 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 764823



1. Entity Name
THE GARDENS AT PALM-AIRE CONDOMINIUM
ASSOCIATION, INC.

Principal Place of Business
C/O ROYAL PROPERTY MANAGEMENT INC.
3040 N.W. 68TH STREET BOX #2
FT. LAUDERDALE, FL 33309 US

Mailing Address
C/O ROYAL PROPERTY MANAGEMENT INC.
8317 WEST ATLANTIC BLVD.
CORAL SPRINGS, FL 33071 US

FILED

08 AUG 18 PM 1:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



5/9/08 90006 032-6125
04212008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-2237656

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

ROYAL PROPERTY MANAGEMENT INC.
8317 WEST ATLANTIC BLVD.
CORAL SPRINGS, FL 33071

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

Filing Fee is \$61.25
Due by May 1, 2008

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 VD ☐ Delete
NAME PRISCIANTELLI, BETH
STREET ADDRESS 3040 NW 68 ST BOX #2
CITY-ST-ZIP FORT LAUDERDALE, FL 33309

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☒ Delete
NAME ~~MARY, RICHARD~~
STREET ADDRESS 3040 NW 68 ST BOX #2
CITY-ST-ZIP FORT LAUDERDALE, FL 33309

TITLE P ☐ Change ☒ Addition
NAME Davis, Goldwice
STREET ADDRESS 3030 NW 68 ST #203
CITY-ST-ZIP FORT LAUDERDALE FL 33309

TITLE SD ☐ Delete
NAME BOARD, TERRY
STREET ADDRESS 3040 NW 68TH ST. BOX #2
CITY-ST-ZIP FORT LAUDERDALE, FL 33309

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME RUSSO, L
STREET ADDRESS 3040 N.W. 68 ST BOX #2
CITY-ST-ZIP FT LAUDERDALE, FL 33309

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD ☐ Delete
NAME KIZEE, JOON
STREET ADDRESS 3020 NW 68TH STREET BOX #2
CITY-ST-ZIP FT. LAUDERDALE, FL 33309

TITLE D ☒ Change ☐ Addition
NAME KIZER, JOAN
STREET ADDRESS 3020 NW 68th #105
CITY-ST-ZIP Ft. Lauderdale FL 33309

TITLE PD ☐ Delete
NAME BOENFER, AMANDA
STREET ADDRESS 3030 NW 68TH ST BOX #2
CITY-ST-ZIP FORT LAUDERDALE, FL 33309

TITLE D ☒ Change ☐ Addition
NAME Bolender, AMANDA
STREET ADDRESS 3030 N.W. 68th ST #204
CITY-ST-ZIP Ft. Lauderdale FL 33309

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/08

Date

954-757-9292

Daytime Phone #