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

Mar 07, 2005 8:00 am DOCUMENT # N11573 **Secretary of State** 03-07-2005 90258 028 ****61.25 VIZCAYA AT PALM-AIRE ASSOCIATION, INC. Principal Place of Business Mailing Address 3500 GATEWAY DR 3500 GATEWAY DR 40026973 STE 202 **STE 202** POMPANO BEACH FL 33069 POMPANO BEACH FL 33069 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) Applied For City & State 4. FÉI Number City & State 59-2710019 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CALATCHI, RALPH DR. Street Address (P.O. Box Number is Not Acceptable) 3500 GATEWAY DR STE 202 POMPANO BEACH FL 33069 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 DATE (NOTE, Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Florida Department of State Added to Fees Due By May 1, 2005 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITI F ☐ Change ☐ Addition CALATCHI, R. DR. NAME NAME 3500 GATEAY DR., STE. 202 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33069 CITY-ST-ZIP CITY-ST-ZIP SD ☐ Change ☐ Addition TITLE ☐ Delete ROMEO, RANDOLPH NAME NAME 3500 GATEWAY DR., STE. 202 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33069 CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE DALY, CANDIS NAME NAME 3500 GATEWAY DR., STE 202 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33069 CITY-ST-ZIP CITY-ST-ZIP VΡ ☐ Change Addition TITLE □ Delete TITLE BIAFORA, MARTIN NAME 3500 GATEWAY DR., STE 202 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL-33069 CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE OLIET, SEYMOUR DR. NAME NAME 3500 GATEWAY DR., STE. 202 STREET ADDRESS STREET ADDRESS POMPANO BCH FL 33069 CITY-ST-ZIP 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

LANDES, MARTIN

3500 GATEWAY DR., STE, 202

POMPANO BEACH FL 33069

TITLE

NAME

STREET ADDRESS

CITY-ST-7IP

lielatilis SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

□ Delete

FILED

02-03-05 954 978 0758
Date Destring Phone #

☐ Change

Addition Addition