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CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 13 AM 11:16

DOCUMENT # N17331 (2)

1. Corporation Name
PARC REGENT CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
184 BRADLEY PLACE PALM BEACH FL 33480	184 BRADLEY PLACE PALM BEACH FL 33480

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/15/1986
3a. Date of Last Report: 03/29/1994
4. FEI Number: 59-2741950 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

GERSON, GARY, ESQ.
1645 PALM BEACH LAKES BLVD. SUITE 1200
W. PALM BEACH FL 33401

10. Name and Address of New Registered Agent

31 Name: David St. John
32 Street Address (P.O. Box Number is Not Acceptable): 500 Australian Ave Suite #600
33 West Palm Beach, Fl.
34 City: FL 35 Zip Code: 33409

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ 3/7/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	FISHER, LESTER	1.2 NAME	
STREET ADDRESS	184 BRADLEY PL, #402	1.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH FL	1.4 CITY-ST-ZIP	
TITLE	DT	2.1 TITLE	☐ Change ☐ Addition
NAME	PUDER, ROBERT	2.2 NAME	
STREET ADDRESS	184 BRADLEY PL, #202	2.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH FL	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	☐ Change ☐ Addition
NAME	SPITZER, GEORGE	3.2 NAME	
STREET ADDRESS	184 BRADLEY PL, #302	3.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	GOTTWALD, FLOYD, JR.	4.2 NAME	
STREET ADDRESS	184 BRADLEY PL, #103/104	4.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	D ☒ Change ☐ Addition
NAME	HASSENFELD, HAROLD	5.2 NAME	Hassenfeld, Rita Dee
STREET ADDRESS	184 BRADLEY PL 203/204	5.3 STREET ADDRESS	184 Bradley Place 203/204
CITY-ST-ZIP	PALM BEACH FL	5.4 CITY-ST-ZIP	Palm Beach, Fl. 33480
TITLE	DS	6.1 TITLE	☐ Change ☐ Addition
NAME	BELFER, ROBERT	6.2 NAME	
STREET ADDRESS	184 BRADLEY PL, #502	6.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH FL	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ G. Spitzer, V.P. 2/28/95 (407)659-1419
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0013197