

43-47 B-3978 NC
FILE NOW: FILING FEE IS \$61.25

FILED
Apr 03 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N17331** (2)

1. Corporation Name

PARC REGENT CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 184 BRADLEY PLACE PALM BEACH FL 33480	Mailing Address 184 BRADLEY PLACE PALM BEACH FL 33480-3705
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3. Date Incorporated or Qualified 10/15/1986	3a. Date of Last Report 02/26/1996
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2. Principal Place of Business	2a. Mailing Address
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21	26
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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22	27
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City & State	City & State
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23	28
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Zip	Country	Zip	Country
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24	25	29	30
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4. FEI Number 59-2741950	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ST. JOHN, DAVID
500 AUSTRALIAN AVE
STE 600
W. PALM BEACH FL 33409**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____
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 ☐ DELETE	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 ☐ DELETE	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 ☐ DELETE	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 ☐ DELETE	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 ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	HASSENFELD, RITA DEE	5.2 NAME	
STREET ADDRESS	184 BRADLEY PL 203/204	5.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH FL	5.4 CITY-ST-ZIP	
TITLE	DS ☐ DELETE	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 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/97 561-659-1419
Date Daytime Phone # 0039496

CR2E037 (9/96)