

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90217 040 ****61.25

DOCUMENT # N17331
 1. Entity 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
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DO NOT WRITE IN THIS SPACE

14006461



04212005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2741950	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 ST. JOHN, DAVID
 1601 FORUM PLACE
 STE 701
 W. PALM BEACH, FL 33401

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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, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FISHER, LESTER 184 BRADLEY PL, #402 PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT PUDEK, ROBERT 184 BRADLEY PL, #202 PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GOTTWALD, FLOYD, JR. 184 BRADLEY PL, #103/104 PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HASSENFELD, RITA DEE 184 BRADLEY PL 203/204 PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BELFER, ROBERT 184 BRADLEY PL, #502 PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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.

SIGNATURE: ROBERT S. PUDEK 4/28/05 561-659-1565
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #