

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713840

FILED
Apr 03, 2012
Secretary of State

Entity Name: THE FOREVER APRIL ASSOCIATION INC.

Current Principal Place of Business:

1333 E. HALLANDALE BCH. BLVD.
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

1333 E. HALLANDALE BCH. BLVD.
HALLANDALE, FL 33009

New Mailing Address:

10112 USA TODAY WAY
MIRAMAR, FL 33025

FEI Number: 59-1499174

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOMIKOS, CHRIS
1333 E HALLANDALE BCH BLVD
411
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

ASSOCIATION SERVICES OF FLORIDA
10112 USA TODAY WAY
MIRAMAR, FL 33025 US

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.

SIGNATURE: ASSOCIATION SERVICES OF FLORIDA
Electronic Signature of Registered Agent

04/03/2012

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: NOMIKOS, CHRIS
Address: 1333 E. HALLANDALE BCH BLVD
City-St-Zip: HALLANDALE, FL 33009

Title: TREA
Name: BELENKE, BURTON
Address: 1333 E. HALLANDALE BCH BLVD
City-St-Zip: HALLANDALE, FL 33009

Title: SEC
Name: PLOTNIKOVA, NATALIA
Address: 1333 E. HALLANDALE BCH BLVD
City-St-Zip: HALLANDALE, FL 33009

Title: DIR
Name: QUEEN, FRANK
Address: 1333 E. HALLANDALE BCH BLVD APT S324
City-St-Zip: HALLANDALE, FL 33009

Title: DIR
Name: LUCCHESI, ART A
Address: 1333 E. HALLANDALE BCH BLVD APT S428
City-St-Zip: HALLANDALE, FL 33009

Title: DIR
Name: POPI, MARY
Address: 1333 E. HALLANDALE BCH BLVD APT M238
City-St-Zip: HALLANDALE, FL 33009

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ASSOCIATION SERVICES OF FLORIDA
Electronic Signature of Signing Officer or Director

RA

04/03/2012

Date