

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713840

Entity Name: THE FOREVER APRIL ASSOCIATION INC.**Current Principal Place of Business:**1333 E. HALLANDALE BCH. BLVD.
HALLANDALE, FL 33009**Current Mailing Address:**1333 EAST HALLANDALE BEACH BLVD
HALLANDALE BEACH, FL 33009 US**FEI Number:** 59-1499174**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RHONDA HOLLANDER PA
314 SOUTH FEDERAL HWY
DANIA BEACH, FL 33004 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:** RHONDA HOLLANDER, ESQ.

03/07/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name TREMBLAY, NORMAN
Address 1333 E. HALLANDALE BCH BLVD
APRIL SONG APT 327
City-State-Zip: HALLANDALE FL 33009

Title SEC
Name PLOTNIKOVA, NATALIA
Address 1333 E. HALLANDALE BCH BLVD
APRIL SONG APT 324
City-State-Zip: HALLANDALE FL 33009

Title DIR
Name LUCCHESI, ARTHUR A
Address 1333 E. HALLANDALE BCH BLVD
APRIL BREEZE APT 410
City-State-Zip: HALLANDALE FL 33009

Title TREASURER
Name BELENKE, BURTON
Address 1333 EAST HALLANDALE BCH BLVD.
APRIL SONG APT 428
City-State-Zip: HALLANDALE FL 33009

Title VP
Name TRIF, ELENA
Address 1333 E. HALLANDALE BCH BLVD
APRIL MIST APT 443
City-State-Zip: HALLANDALE FL 33009

Title DIR
Name KREUZER, DAVE
Address 1333 E. HALLANDALE BCH BLVD APT
S324
APRIL BREEZE APT 303
City-State-Zip: HALLANDALE FL 33009

Title DIR
Name POPI, MARY
Address 1333 E. HALLANDALE BEACH BLVD
APRIL MIST APT 444
City-State-Zip: HALLANDALE FL 33009

Title DIRECTOR
Name CAPPARUCCINI, JOSEPH
Address 1333 E. HALLANDALE BEACH BLVD
APRIL BREEZE APT 309
City-State-Zip: HALLANDALE FL 33009

Continues on page 2

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: ARTHUR A. LUCCHESI**DIRECTOR**

03/07/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	STANCIU, JOHNNY
Address	1333 E. HALLANDALE BEACH BLVD APRIL MIST APT 344
City-State-Zip:	HALLANDALE FL 33009