

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 713840

**FILED**  
**Apr 26, 2013**  
**Secretary of State**  
**CC7116017419**

**Entity Name:** THE FOREVER APRIL ASSOCIATION INC.

**Current Principal Place of Business:**

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

**Current Mailing Address:**

10112 USA TODAY WAY  
MIRAMAR, FL 33025

**FEI Number:** 59-1499174

**Certificate of Status Desired:** No

**Name and Address of Current 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

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

Title           TREA  
Name           KREUZER, DAVE  
Address        1333 E. HALLANDALE BCH BLVD  
City-State-Zip: HALLANDALE FL 33009

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

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

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

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

Title           D  
Name           BELENKE, BURTON  
Address        1333 EAST HALLANDALE BCH BLVD.  
City-State-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:** NORMAN TREMBLAY

**P**

**04/26/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date