## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 720415** 

Entity Name: MAINLANDS OF TAMARAC SECTION EIGHT ASSOCIATION,

INC.

**Current Principal Place of Business:** 

5711 NW 67TH AVE TAMARAC, FL 33321

**Current Mailing Address:** 

5711 NW 67 AVE TAMARAC, FL 33321

FEI Number: 23-7096608 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GELLER-SCHNAITMAN, TRACEY S 2531 ARAGON BLVD. SUNRISE, FL 33322 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

**FILED** Apr 25, 2017

**Secretary of State** 

CC2975186754

Officer/Director Detail:

Title **DIRECTOR** Title PRESIDENT, DIRECTOR Name HARTMANN, JULIE Name YERIAN, RUSSELL Address 5711 NW 67 AVE Address **5711 NW 67 AVENUE** City-State-Zip: TAMARAC FL 33321 City-State-Zip: TAMARAC FL 33321

Title **DIRECTOR** Title VP, DIRECTOR LONG, KATHI Name FRONEK, JOSEPH Name Address 5711 NW 67 AVE Address 5711 NW 67 AVE

City-State-Zip: TAMARAC FL 33321 City-State-Zip: TAMARAC FL 33321

Title SECRETARY, DIRECTOR Title DIRECTOR, TREASURER

Name OLSHAN, SHELLY Name MANSARAM, LALCHAN Address 5711 NW 67 AVE 5711 NW 67 AVE Address City-State-Zip: TAMARAC FL 33321 City-State-Zip: TAMARAC FL 33321

Title **DIRECTOR** 

Name LEIGHT, SHARON Address 5711 NW 67 AVE TAMARAC FL 33321 City-State-Zip:

SIGNATURE: RUSSELL YERIAN

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.

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

04/25/2017

Date