

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 720638

**Entity Name:** MAINLANDS SECTION THREE ASSOCIATION,INC.**Current Principal Place of Business:**4300 NW 46TH STREET  
TAMARAC, FL 33319**Current Mailing Address:**C/O MIAMI MANAGEMENT, INC.  
1145 SAWGRASS CORPORATE PARKWAY  
SUNRISE, FL 33323 US**FEI Number:** 59-1444564**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KAYE BENDER REMBAUM  
MICHAEL BENDER  
1200 PARK CENTRAL BLVD S  
POMPAÑO BEACH, FL 33064 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	PRESIDENT
Name	EHRlich, SANDY
Address	C/O MIAMI MANAGEMENT, INC. 1145 SAWGRASS CORPORATE PARKWAY
City-State-Zip:	SUNRISE FL 33323

Title	SECRETARY
Name	CUMMINGS, DOMINIQUE
Address	C/O MIAMI MANAGEMENT, INC. 1145 SAWGRASS CORPORATE PARKWAY
City-State-Zip:	SUNRISE FL 33323

Title	TREASURER
Name	GLAZER, MATHIEU
Address	C/O MIAMI MANAGEMENT, INC. 1145 SAWGRASS CORPORATE PARKWAY
City-State-Zip:	SUNRISE FL 33323

Title	DIRECTOR, CANADIAN LIAISON
Name	COTE, LUCILLE
Address	C/O MIAMI MANAGEMENT, INC. 1145 SAWGRASS CORPORATE PARKWAY
City-State-Zip:	SUNRISE FL 33323

Title	VP
Name	LEKACZ, WALTER
Address	C/O MIAMI MANAGEMENT, INC. 1145 SAWGRASS CORPORATE PARKWAY
City-State-Zip:	SUNRISE FL 33323

*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: SANDY EHRlich****PRESIDENT****04/15/2025**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date