#### 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 721112** 

Entity Name: HEATHGATE-SUNFLOWER HOMEOWNERS ASSOCIATION, INC.

FILED Mar 19, 2019 Secretary of State 4558403785CC

### **Current Principal Place of Business:**

NOTE: CLUBHOUSE INQUIRES CALL 954-722-0650

HEATHGATE-SUNFLOWER HOMEOWNERS ASSOCIATION8100 N.W. 70TH AVE.

TAMARAC, FL 33321

# **Current Mailing Address:**

FOR ESTOPPEL LETTERS MAIL ATTN. OFFICE MANAGER TO:

MAIL TO: PO BOX 25406 TAMARAC, FL 33320 US

FEI Number: 59-1567570 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

KAYE BENDER REMBAUM ATTORNEYS AT LAW
KAYE BENDER REMBAUM ATTORNEYS AT LAW
1200 PARK CENTRAL BOULEVARD SOUTH POMPANO BEACH33064 NOTE: FOR DUES
PMT/ ESTOPPELS / INQUIRES CONTACT ASSOCIATION DIRECT

PO BOX 25406 TAMARAC, FL 33320 US, FL 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: ANDREW BLACK, ESQUIRE

03/19/2019

Electronic Signature of Registered Agent

Date

## Officer/Director Detail:

Title PRES Title VF

Name CLARKE, MICHAEL Name CANAZARO, MICHAEL ANTHONY

Address MAIL TO: PO BOX 25406 Address 7502 NW 72 TERRACE
City-State-Zip: TAMARAC FL 33320 City-State-Zip: TAMARAC FL 33321

Title SEC Title TREAS

Name LETTIERI, GINA Name CANANZARO, MICHAEL

Address PO BOX 25406 Address PO BOX 25406

City-State-Zip: TAMARAC FL 33320 City-State-Zip: TAMARAC FL 33320

Title MAIL Title OFFICE MANAGER

Name \* ALL MAIL TO: HEATHGATE- Name FOR ESTOPPEL LETTERS \*\* MAIL

SUNFLOWER ASSOC. ATTN: OFFICE MANAGER \*\*

Address PO BOX 25406 Address MAIL TO: PO BOX 25406

City-State-Zip: TAMARAC FL 33320 City-State-Zip: TAMARAC FL 33320

,

Title DIRECTOR Title DIRECTOR

Name SHAW, PHYLLIS Name HUBEN, MARYANN

Address PO BOX 25406 Address PO BOX 25406

City-State-Zip: TAMARAC FL 33320 City-State-Zip: TAMARAC FL 33320

### 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: MICHAEL CANAZARO TREASURER 03/19/2019

# Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

REUTHER, KIMBERLY Name Name ANDERSON, IVONNE

Address NOTE: CLUBHOUSE INQUIRES CALL 954-722-Address 8100 NW 70TH AVE

0650 HEATHGATE-SUNFLOWER HOMEOWNERS City-State-Zip: TAMARAC FL 33321

ASSOCIATION 8100 N.W. 70TH AVE.

City-State-Zip: TAMARAC FL 33321