

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 721112

**Entity Name:** HEATHGATE-SUNFLOWER HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**

NOTE: CLUBHOUSE INQUIRES CALL 954-722-0650  
HEATHGATE-SUNFLOWER HOMEOWNERS ASSOCIATION 8100 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 BEACH 33064 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

05/13/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRES	Title	VP
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-SUNFLOWER ASSOC.	Name	FOR ESTOPPEL LETTERS ** MAIL 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

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*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

TREASSURE

05/13/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR	Title	DIRECTOR
Name	REUTHER, KIMBERLY	Name	ANDERSON, IVONNE
Address	NOTE: CLUBHOUSE INQUIRES CALL 954-722-0650 HEATHGATE-SUNFLOWER HOMEOWNERS ASSOCIATION 8100 N.W. 70TH AVE.	Address	8100 NW 70TH AVE
City-State-Zip:	TAMARAC FL 33321	City-State-Zip:	TAMARAC FL 33321