

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 738696

**Entity Name:** FLANDERS D ASSOCIATION, INC.**Current Principal Place of Business:**THE CONTINENTAL GROUP  
6300 PRK OF COMMERCE BLVD  
BOCA RATON, FL 33487**Current Mailing Address:**THE CONTINENTAL GROUP  
6300 PRK OF COMMERCE BLVD  
BOCA RATON, FL 33487 US**FEI Number:** 59-1774407**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SKRLD, INC.  
201 ALHAMBRA CIRCLE 11TH FLOOR  
CORAL GABLES, FL 33134 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:** LAURA M MANNING-HUDSON

04/08/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P
Name	DREZNER, MARVIN
Address	163 FLANDERS D
City-State-Zip:	DELRAY BEACH FL 33484

Title	VP
Name	AARONS, ALAN
Address	145 FLANDERS D
City-State-Zip:	DELRAY BEACH FL 33484

Title	DIRECTOR
Name	CHUDNOFF, ANNE
Address	150 FLANDERS D
City-State-Zip:	DELRAY BEACH FL 33484

Title	D
Name	GOODMAN, JACK
Address	164 FLANDERS D
City-State-Zip:	DELRAY BEACH FL 33484

Title	T
Name	MOORE, GEORGE
Address	188 FLANDERS D
City-State-Zip:	DELRAY BEACH FL 33484

Title	D
Name	SCHACHER, SELMA
Address	155 FLANDERS D
City-State-Zip:	DELRAY BEACH FL 33484

Title	SECRETARY
Name	DEITCHMAN, RONI
Address	153 FLANDERS D
City-State-Zip:	DELRAY BEACH FL 33484

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:** MARVIN DREZNER

PRES.

04/08/2014

Electronic Signature of Signing Officer/Director Detail

Date