2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738698

Entity Name: FLANDERS L ASSOCIATION, INC.

Current Principal Place of Business:

C/O WILSON LANDSCAPING & MANAGEMENT CORP.

1300 NW 17TH AVE. SUITE 270
DELRAY BEACH, FL 33445

Current Mailing Address:

C/O WILSON LANDSCAPING & MANAGEMENT CORP. 1300 NW 17TH AVE. SUITE 270

DELRAY BEACH, FL 33445 US

FEI Number: 59-1790886 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, DANNY L C/O WILSON LANDSCAPING & MANAGEMENT CORP. 1300 NW 17TH AVE. SUITE 270 DELRAY BEACH, FL 33445 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 Title DIRECTOR

Name EISNER, RUBY Name ZUCKER, FLORENCE

Address C/O WILSON LANDSCAPING & Address C/O WILSON LANDSCAPING &

MANAGEMENT CORP.

1300 NW 17TH AVE. SUITE 270

MANAGEMENT CORP.

1300 NW 17TH AVE. SUITE 270

300 NW 1711 AVE. 3011 E270

City-State-Zip: DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445

Title SECRETARY Title VICE-PRESIDENT

Name CLARK, ARLINE Name SLEDOVKER, GREG

Address C/O WILSON LANDSCAPING Address C/O WILSON LANDSCAPING

MANAGEMENT CORP. &MANAGEMENT CORP.

1300 NW 17TH AVE. SUITE 270 1300 NW 17TH AVE. SUITE 270

City-State-Zip: DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445

Title TREASURER Title DIRECTOR

Name LYNCH, ANNA Name EICHELBAUM, JACK

Address C/O WILSON LANDSCAPING & Address C/O WILSON LANDSCAPING &

MANAGEMENT CORP. MANAGEMENT CORP.

1300 NW 17TH AVE. SUITE 270 1300 NW 17TH AVE. SUITE 270

City-State-Zip: DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445

Title DIRECTOR

Name ERDHEIM, DOTTIE

Address C/O WILSON LANDSCAPING &

MANAGEMENT CORP.

1300 NW 17TH AVE. SUITE 270

City-State-Zip: DELRAY BEACH FL 33445

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: RUBY EISNER PRESIDENT 01/16/2019

FILED
Jan 16, 2019
Secretary of State
2786933973CC