

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 738699

**FILED**  
**Mar 31, 2015**  
**Secretary of State**  
**CC3607291472**

**Entity Name:** FLANDERS O ASSOCIATION, INC.

**Current Principal Place of Business:**

FIRST SERVICE RESIDENTIAL  
6300 PARK OF COMMERCE BLVD  
BOCA RATON, FL 33487

**Current Mailing Address:**

FIRST SERVICE RESIDENTIAL  
6300 PARK OF COMMERCE BLVD  
BOCA RATON, FL 33487 US

**FEI Number:** 59-1783641

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SKRLD,INC.  
1655 PALM BEACH LAKES BLVD.  
C-500  
W. PALM BEACH, FL 33401 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

03/31/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           KLEIN, HARRIET  
Address        712 FLANDERS O  
City-State-Zip: DELRAY BEACH FL 33484

Title           PRESIDENT  
Name           GOLDNER, ALBERT  
Address        709 FLANDERS O  
City-State-Zip: DELRAY BEACH FL 33484

Title           S  
Name           SCHNEIDER, ELEANOR  
Address        683 FLANDERS O  
City-State-Zip: DELRAY BEACH FL 33484

Title           VP  
Name           EAGLE, ALICE  
Address        708 FLANDERS O  
City-State-Zip: DELRAY BEACH FL 33484

Title           DIRECTOR  
Name           MANIFF, SHEPPARD  
Address        715 FLANDERS O  
City-State-Zip: DELRAY BEACH FL 33484

Title           DIRECTOR  
Name           CAPPELLONI, EILEEN  
Address        693 FLANDERS O  
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:** ALBERT GOLDNER

**PRES.**

03/31/2015

Electronic Signature of Signing Officer/Director Detail

Date