

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740531

Entity Name: FLANDERS G ASSOCIATION, INC.**Current Principal Place of Business:**FIRST SERVICE RESIDENTIAL
6300 PRK OF COMMERCE BLVD
BOCA RATON, FL 33487**Current Mailing Address:**FIRST SERVICE RESIDENTIAL
6300 PRK OF COMMERCE BLVD
BOCA RATON, FL 33487 US**FEI Number:** 59-1819234**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

01/24/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name SPILFOGEL, STUART
Address 335 FLANDERS G
City-State-Zip: DELRAY BEACH FL 33484

Title PRESIDENT
Name LEFKOWITZ, BONNIE
Address 296 FLANDERS G
City-State-Zip: DELRAY BEACH FL 33484

Title TREASURER
Name KAUFMAN, BURTON
Address 300 FLANDERS G
City-State-Zip: DELRAY BEACH FL 33484

Title D.
Name MARKOFF, IRVING
Address 302 FLANDERS G
City-State-Zip: DELRAY BEACH FL 33484

Title SECRETARY
Name MANISCALCO, LORENE
Address 291 FLANDERS G
City-State-Zip: DELRAY BEACH FL 33484

Title VP
Name PASINI, TULIO
Address 332 FLANDERS G
City-State-Zip: DELRAY BEACH FL 33487

Title DIRECTOR
Name BLOOM, GERALD
Address 309 FLANDERS G
City-State-Zip: DELRAY BEACH FL 33487

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: BONNIE LEFKOWITZ

PRESIDENT

01/24/2018

Electronic Signature of Signing Officer/Director Detail

Date