### 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# 740532

Entity Name: FLANDERS J ASSOCIATION, INC.

### **Current Principal Place of Business:**

SEACREST SERVICES INC. 2101 CENTREPARK WEST DRIVE 110 WEST PALM BEACH, FL 33409

## **Current Mailing Address:**

SEACREST SERVICES INC. 2101 CENTREPARK WEST DRIVE 110 WEST PALM BEACH, FL 33409 US

# FEI Number: 59-1805173

### Name and Address of Current Registered Agent:

SIEGFRIED, RIVERA, HYMAN, LERNER, DE LA TORRE, MARS & SOBEL PA 201 ALHAMBRA CIRCLE ELEVENTH 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	E LAURA MANNING		01/07/202
	Electronic Signature of Registered Agent		Date
Officer/Dire	ctor Detail :		
Title	TREASURER	Title	PRESIDENT
Name	LEMASURIER, ROSE ANN	Name	RADTKE, SUSAN
Address	SEACREST SERVICES INC. 2101 CENTREPARK WEST DRIVE 110	Address	SEACREST SERVICES INC. 2101 CENTREPARK WEST DRIVE 110
City-State-Zip:	WEST PALM BEACH FL 33409	City-State-Zip:	WEST PALM BEACH FL 33409
Title	VICE PRESIDENT	Title	SECRETARY
Name	FREDRICKS, GERTRUDE	Name	FRIEDMAN, MICHAEL
Address	SEACREST SERVICES INC. 2101 CENTREPARK WEST DRIVE 110	Address	SEACREST SERVICES INC. 2101 CENTREPARK WEST DRIVE 110
City-State-Zip:	WEST PALM BEACH FL 33409	City-State-Zip:	WEST PALM BEACH FL 33409
Title	DIRECTOR	Title	DIRECTOR
Name	GREEN, SHELTON	Name	ZWEIFACH, RITA
Address	SEACREST SERVICES INC. 2101 CENTREPARK WEST DRIVE 110	Address	SEACREST SERVICES INC. 2101 CENTREPARK WEST DRIVE 110
City-State-Zip:	WEST PALM BEACH FL 33409	City-State-Zip:	WEST PALM BEACH FL 33409
Title	DIRECTOR		
Name	AKERS, TOBY		
Address	SEACREST SERVICES INC. 2101 CENTREPARK WEST DRIVE 110		
City-State-Zin:	WEST PALM BEACH FL 33409		

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: SUSAN RADTKE

PRESIDENT

# FILED Jan 07, 2021 Secretary of State 2231079694CC

Certificate of Status Desired: No