

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742038

Entity Name: FLANDERS S ASSOCIATION, INC.**Current Principal Place of Business:**C/O PHOENIX MANAGEMENT SERVICES
6131B LAKE WORTH RD
GREENACRES, FL 33461**Current Mailing Address:**C/O PHOENIX MANAGEMENT SERVICES
6131
GREENACRES, FL 33463 US**FEI Number:** 59-1828981**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KASSOWER, MICHAEL
C/O FRANK, WEINBERG & BLACK
1875 CORPORATE BLVD
BOCA RATON, FL 33431 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:** MICHAEL KASSOWER

02/27/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	TURSCHMANN, CYNTHIA
Address	C/O PHOENIX MANAGEMENT SERVICES 6131B LAKE WORTH RD
City-State-Zip:	GREENACRES FL 33463

Title	TREASURER
Name	TURSCHMANN, CYNTHIA
Address	C/O PHOENIX MANAGEMENT SERVICES 6131B LAKE WORTH RD
City-State-Zip:	GREENACRES FL 33461

Title	SECRETARY
Name	LEVITON, FRANK
Address	C/O PHOENIX MANAGEMENT SERVICES 6131B LAKE WORTH RD
City-State-Zip:	GREENACRES FL 33463
Title	DIRECTOR
Name	SOLOMAN, AUDREY
Address	C/O PHOENIX PROPERTY MANAGEMENT, 6131B LAKE WORTH RD. 6131B LAKE WORTH RD.
City-State-Zip:	GREENACRES FL 33463

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: CYNTHIA TURSCHMANN

PRESIDENT

02/27/2023

Electronic Signature of Signing Officer/Director Detail

Date