

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742038

Entity Name: FLANDERS S ASSOCIATION, INC.**Current Principal Place of Business:**THE CONTINENTAL GROUP
6300 PARK OF COMMERCE BLVD.
BOCA RATON, FL 33487**Current Mailing Address:**THE CONTINENTAL GROUP
6300 PARK OF COMMERCE BLVD.
BOCA RATON, FL 33487 US**FEI Number:** 59-1828981**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SKRLD, INC.
201 ALHAMBRA CIRCLE 11TH 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:** LAURA M MANNING-HUDSON

04/01/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name CATULLO, ROBERT
Address 879 FLANDERS S
City-State-Zip: DELRAY BEACH FL 33484

Title P
Name LEVITON, FRANK
Address 867 FLANDERS S
City-State-Zip: DELRAY BEACH FL 33484

Title SECRETARY
Name SLAVIN, HYMAN
Address 907 FLANDERS S
City-State-Zip: DELRAY BEACH FL 33484

Title D
Name FERTIG, RENEE
Address 898 FLANDERS S
City-State-Zip: DELRAY BEACH FL 33484

Title D
Name HELLER, MURRAY
Address 865 FLANDERS S
City-State-Zip: DELRAY BEACH FL 33484

Title TREASURER
Name TURSCHMANN, CYNTHIA
Address 866 FLANDERS S
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name LOONAN, HOWARD
Address 899 FLANDERS S
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: FRANK LEVITON

PRESIDENT

04/01/2013

Electronic Signature of Signing Officer/Director Detail

Date