

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746769

**Entity Name:** NORMANDY H 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:** 59-1991175**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

03/19/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	VP
Name	GOLDSTEIN, SAM
Address	370 NORMANDY H
City-State-Zip:	DELRAY BEACH FL 33484

Title	T
Name	COHEN, LOUIS
Address	345 NORMANDY H
City-State-Zip:	DELRAY BCH FL 33484

Title	D
Name	KORNBLATT, ESTA
Address	337 NORMANDY H
City-State-Zip:	DELRAY BEACH FL 33484

Title	P
Name	HOROWITZ, SHEPARD
Address	374 NORMANDY H
City-State-Zip:	DELRAY BEACH FL 33484

Title	D
Name	DRESKIN, IDA
Address	347 NORHANDY H
City-State-Zip:	DELRAY BEACH FL 33484

Title	SEC
Name	GELMAN, EMILY
Address	373 NORMANDY H
City-State-Zip:	DELRAY BEACH FL 33484

Title	DIRECTOR
Name	GLUCK, HERMAN
Address	348 NORMANDY H
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:** SHEPARD HOROWITZ

PRESIDENT

03/19/2013

Electronic Signature of Signing Officer/Director Detail

Date