## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 746770** 

Entity Name: NORMANDY I ASSOCIATION, INC.

**Current Principal Place of Business:** 

FIRST SERVICE RESIDENTIAL 6300 PARK OF COMMERCE BLVD BOCA RATON, FL 33487

## **Current Mailing Address:**

FIRST SERVICE RESIDENTIAL 6300 PARK OF COMMERCE BLVD BOCA RATON, FL 33487 US

FEI Number: 59-1981747 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SKRLD, INC.

1655 PLAM 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

Electronic Signature of Registered Agent Date

## Officer/Director Detail:

Title DIRECTOR Title TREASURER

Name LEHR, JIM Name HORNSTEIN, ADRIENNE

Address 409 NORMANDY I Address 427 NORMANDY I

City-State-Zip: DELRAY BEACH FL 33484 City-State-Zip: DELRAY BEACH FL 33484

Title SEC Title D

NameADLER, REGINANameCOHEN, SALLYAddress422 NORMANDY IAddress395 NORMANDY I

City-State-Zip: DELRAY BEACH FL 33484 City-State-Zip: DELRAY BEACH FL 33484

Title PRESIDENT Title VP

Name SILBER, CAROL Name BIRN, STEPHEN
Address 431 NORMANDY I Address 407 NORMANDY I

City-State-Zip: DELRAY BEACH FL 33484 City-State-Zip: DELRAY BEACH FL 33446

**PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

FILED Feb 14, 2018

**Secretary of State** 

CC5109069497

02/14/2018

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.