

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746963

Entity Name: NORMANDY S 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: 59-1951431

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SKRLD, INC.
1655 PALM 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BRIDGES, LINDA
Address 874 NORMANDY S
City-State-Zip: DELRAY BEACH FL 33484

Title VP
Name SMITH, CAROLEE
Address 873 NORMANDY S
City-State-Zip: DELRAY BEACH FL 33484

Title SECRETARY
Name AUGLIN, WESSELIN
Address 889 NORMANDY S
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name SMITH, ROBERT
Address 873 NORMANDY S
City-State-Zip: DELRAY BEACH FL 33484

Title DIR
Name LERNER, JUDY
Address 909 NORMANDY S
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name STANGER, HARVEY
Address 890 NORMANDY S
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name ROUSE, ROCHELLE
Address 910 NORMANDY 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: LINDA BRIDGES

PRESIDENT

02/14/2018

Electronic Signature of Signing Officer/Director Detail

Date