

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 763504

**Entity Name:** SUNFLOWER MARGATE ASSOCIATION, INC.**Current Principal Place of Business:**7807 SUNFLOWER DRIVE  
MARGATE, FL 33063**Current Mailing Address:**PO BOX 772488  
CORAL SPRINGS, FL 33077**FEI Number:** 65-0034273**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHENDELL & ASSOCIATES, P.A.  
3650 N FEDERAL HWY STE 201  
202  
LIGHTHOUSE POINT, FL 33064 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	S
Name	FUHRMAN, MARTHA
Address	1912 NW 80TH AVE
City-State-Zip:	MARGATE FL 33063

Title	T
Name	GOONAN, PATRICK
Address	7807 SUNFLOWER DR
City-State-Zip:	MARGATE FL 33063

Title	VP
Name	ARTZ, SUSAN
Address	7610 SUNFLOWER DR
City-State-Zip:	MARGATE FL 33063

Title	D
Name	POLICELLA, JOHN
Address	1801 NW 80TH AVE
City-State-Zip:	MARGATE FL

Title	PRESIDENT
Name	CHAMBERLAIN, DAVID
Address	7709 NW 20TH STREET
City-State-Zip:	MARGATE FL 33063

*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:** PATRICK GOONAN

TREASURER

02/27/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date