

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N24077

**Entity Name:** FLEMINGBROOK OWNERS ASSOCIATION, INC.

**FILED**  
**Apr 25, 2017**  
**Secretary of State**  
**CC1239307818**

**Current Principal Place of Business:**

767 BLANDING BLVD.  
STE 112  
ORANGE PARK, FL 32065

**Current Mailing Address:**

767 BLANDING BLVD.  
STE 112  
ORANGE PARK, FL 32065 US

**FEI Number: 59-2880300**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

NEWFIELD, NEAL P  
767 BLANDING BLVD.  
SUITE 112  
ORANGE PARK, FL 32065 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            T  
Name            GREEN, CARMANEILA  
Address        475 SPRINGBROOK DR.  
City-State-Zip: FLEMING ISLAND FL 32003

Title            PRESIDENT  
Name            LIBBY, SHELLEY  
Address        5505 SILKWOOD LN.  
City-State-Zip: FLEMING ISLAND FL 32003

Title            VP  
Name            NORWOOD, LEONARD  
Address        471 BAYBROOK DRIVE  
City-State-Zip: FLEMING ISLAND FL 32003

Title            S  
Name            PAUL, FRENDAHL  
Address        5506 SILKWOOD  
City-State-Zip: FLEMING ISLAND FL 32003

Title            DIRECTOR  
Name            GHAMMASHI, YOLA  
Address        560 COZYBROOK LN  
City-State-Zip: FLEMING ISLAND FL 32003

*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: PAUL FRENDAHL**

**SECRETARY**

**04/25/2017**

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

\_\_\_\_\_  
Date