### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35082

Entity Name: SOUTHWIND ESTATES ASSOCIATION, INC.

**FILED** Mar 02, 2015 **Secretary of State** CC8663807132

# **Current Principal Place of Business:**

9545 PALM ISLES DR

BOYNTON BEACH, FL 33437

## **Current Mailing Address:**

9545 PALM ISLES DR

BOYNTON BEACH, FL 33437 US

FEI Number: 65-0169604 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

SACHS SAX CAPLAN 6111 BROKEN SOUND PARKWAY 200 BOCA RATON, FL 33487 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: RON CAPLAN 03/02/2015

> Date Electronic Signature of Registered Agent

#### Officer/Director Detail:

VΡ Title Title **TREASURER** SEID. BERNARD FRANK, HY Name Name

Address 9545 PALM ISLES DR Address 9545 PALM ISLES DR

BOYNTON BEACH FL 33437 City-State-Zip: City-State-Zip: BOYNTON BEACH FL 33437

Title VΡ Title **SECRETARY** 

Name FAIGMAN, SYDELL Name DLABIK, CHARLOTTE Address 9545 PALM ISLES DR Address 9545 PALM ISLES DR

BOYNTON BEACH FL 33437 City-State-Zip: City-State-Zip: BOYNTON BEACH FL 33437

Title **PRESIDENT** 

Name HAMMER, MILDRED Address 9545 PALM ISLES DR

City-State-Zip: **BOYNTON BEACH FL 33437** 

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: MILDRED HAMMER

Electronic Signature of Signing Officer/Director Detail