

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000002088

**Entity Name:** THE 3421 NORFOLK STREET HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Mar 08, 2015**  
**Secretary of State**  
**CC8229475095**

**Current Principal Place of Business:**

3421 NORFOLK ST.  
APARTMENT 6  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

3418 NORFOLK ST.  
POMPANO BEACH, FL 33062

**FEI Number: 65-0586397**

**Certificate of Status Desired: No**

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

MASSARO, SALVATORE  
3418 NORFOLK ST  
POMPANO BEACH, FL 33062 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 PD  
Name BOLAND, BERRY  
Address 3421 NORFOLK ST.  
APARTMENT 4  
City-State-Zip: POMPANO BEACH FL 33062

Title VD  
Name YINGER, ANN  
Address 3421 NORFOLK STREET, UNIT 1  
City-State-Zip: POMPANO BEACH FL 33062

Title DST  
Name MASSARO, SALVATORE  
Address 3418 NORFOLK STREET  
City-State-Zip: POMPANO BEACH FL 33062

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: SALVATORE MASSARO**

**SEC/TREASURER**

**03/08/2015**

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

\_\_\_\_\_  
Date