

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746964

FILED  
Apr 24, 2012  
Secretary of State

**Entity Name:** NORMANDY T ASSOCIATION, INC.

**Current Principal Place of Business:**

THE CONTINENTAL GROUP  
6300 PARK OF COMMERCE BLVD.  
BOCA RATON, FL 33487 US

**New Principal Place of Business:**

**Current Mailing Address:**

THE CONTINENTAL GROUP  
6300 PARK OF COMMERCE BLVD.  
BOCA RATON, FL 33487 US

**New Mailing Address:**

**FEI Number:** 59-1949883

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARTLEY & MORTON, ATTORNEYS AT LAW, P.A.  
800 VILLAGE SQUARE CROSSING  
SUITE 222  
PALM BEACH GARDENS, FL 33410 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ROSS, SELMA  
**Address:** 955 NORMANDY T  
**City-St-Zip:** DELRAY BEACH, FL 33484

**Title:** S/T  
**Name:** WALLOS, ARLEEN  
**Address:** 920 NORMANDY T  
**City-St-Zip:** DELRAY BEACH, FL 33484

**Title:** D  
**Name:** BROTMAN, S  
**Address:** 959 NORMANDY T  
**City-St-Zip:** DELRAY BEACH, FL 33484

**Title:** D  
**Name:** ROSS, MORTON  
**Address:** 955 NORMANDY T  
**City-St-Zip:** DELRAY BEACH, FL 33484

**Title:** VP  
**Name:** MARQUILIES, RENEE  
**Address:** 935 NORMANDY T  
**City-St-Zip:** DELRAY BEACH, FL 33484

**Title:** D  
**Name:** POPICK, ROSALIE  
**Address:** 950 NORMANDY T  
**City-St-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:** SELMA ROSS

PRES

04/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date