

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000009807

**Entity Name:** FLAGLER AVENUE BUSINESS ASSOCIATION, INC.

**FILED**  
**Apr 29, 2019**  
**Secretary of State**  
**9504019555CC**

**Current Principal Place of Business:**

120 FLAGLER AVENUE  
NEW SMYRNA BEACH, FL 32169

**Current Mailing Address:**

P. O. BOX 2514  
NEW SMYRNA BEACH, FL 32169 US

**FEI Number: 47-2183611**

**Certificate of Status Desired: No**

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

NORADO, JENNY  
2124 PURPLE MARTIN WAY  
PORT ORANGE, FL 32128 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:** JENNY NORADO

04/29/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title BOARD MEMGER  
Name STEGER, RONALD S  
Address P. O. BOX 2514  
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title VP, BOARD  
Name REID, SHERMAN  
Address 1425 N PENINSULA AVE  
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title T, BOARD  
Name NORADO, JENNY  
Address P. O. BOX 2514  
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title P, BOARD  
Name NEUNER, ZOE  
Address P. O. BOX 2514  
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title BOARD  
Name STATHAKIS, ELAINE  
Address P. O. BOX 2514  
City-State-Zip: NEW SMYRNA BEACH FL 32169

*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:** JENNY NORADO

**TREASURER,  
SECRETARY**

04/29/2019

Electronic Signature of Signing Officer/Director Detail

Date