

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48350

Entity Name: NORMANDY SHORES HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**925 FAIRWAY DRIVE
MIAMI BEACH, FL 33141**Current Mailing Address:**925 FAIRWAY DRIVE
MIAMI BEACH, FL 33141 US**FEI Number:** 65-0357282**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TAYLOR, LAURA DAVIDOFF
925 FAIRWAY DRIVE
MIAMI BEACH, FL 33141 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:** LAURA TAYLOR

05/01/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VICE PRESIDENT; DIRECTOR
Name KLEIN, DIANE
Address 765 S SHORE DRIVE
City-State-Zip: MIAMI BEACH FL 33141

Title PRESIDENT, DIRECTOR
Name GOLDSTEIN, JOSHUA
Address 600 NORTH SHORE DRIVE
City-State-Zip: MIAMI BEACH FL 33141

Title DIRECTOR
Name BORITZ, MARVIN
Address 665 S SHORE DR
City-State-Zip: MIAMI BEACH FL 33141

Title TREASURER, DIRECTOR
Name TAYLOR, LAURA
Address 925 FAIRWAY DRIVE
City-State-Zip: MIAMI BEACH FL 33141

Title SECRETARY, DIRECTOR
Name NAGLER, ABIGAIL
Address 245 FAIRWAY DRIVE
City-State-Zip: MIAMI BEACH FL 33141

Title DIRECTOR
Name SILVER, RACHEL
Address 1035 FAIRWAY DRIVE
City-State-Zip: MIAMI BEACH FL 33141

Title DIRECTOR
Name NOBEL, KATHLEEN
Address 811 SOUTH SHORE DRIVE
City-State-Zip: MIAMI BEACH FL 33141

Title DIRECTOR
Name HERNANDEZ, ROLAND
Address 525 S SHORE DRIVE
City-State-Zip: MIAMI BEACH FL 33141

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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: TAYLOR, LAURA**DIRECTOR**

05/01/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WAINER, MITCH
Address	865 NORTH SHORE DRIVE
City-State-Zip:	MIAMI BEACH FL 33141