

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 740531

**Entity Name:** FLANDERS G ASSOCIATION, INC.

**FILED**  
**Jan 24, 2025**  
**Secretary of State**  
**5130266532CC**

**Current Principal Place of Business:**

C/O WILSON MANAGEMENT  
1300 NW 17TH AVE STE 270  
DELRAY BEACH , FL 33445

**Current Mailing Address:**

C/O WILSON MANAGEMENT  
1300 NW 17TH AVE STE 270  
DELRAY BEACH , FL 33445 US

**FEI Number: 59-1819234**

**Certificate of Status Desired: No**

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

ASSOCIATED CORPORATE SERVICES, LLC  
6111 BROKEN SOUND PARKWAY NW  
SUITE 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: MICHAEL UNGERBUEHLER**

**01/24/2025**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LEFKOWITZ, BONNIE  
Address        C/O WILSON MANAGEMENT  
                  1300 NW 17TH AVE STE 270  
City-State-Zip: DELRAY BEACH FL 33445

Title            TREASURER  
Name            PASINI, TULLIO  
Address        C/O WILSON MANAGEMENT  
                  1300 NW 17TH AVE STE 270  
City-State-Zip: DELRAY BEACH FL 33445

Title            SECRETARY  
Name            JACOBS, BARBARA  
Address        C/O WILSON MANAGEMENT  
                  1300 NW 17TH AVE STE 270  
City-State-Zip: DELRAY BEACH FL 33445

Title            VP  
Name            SPILFOGEL, STUART  
Address        C/O WILSON MANAGEMENT  
                  1300 NW 17TH AVE STE 270  
City-State-Zip: DELRAY BEACH FL 33445

Title            DIRECTOR  
Name            DAVIS, JANET  
Address        C/O WILSON MANAGEMENT  
                  1300 NW 17TH AVE STE 270  
City-State-Zip: DELRAY BEACH FL 33445

Title            DIRECTOR  
Name            MANISCALO, LORENE  
Address        C/O WILSON MANAGEMENT  
                  1300 NW 17TH AVE STE 270  
City-State-Zip: DELRAY BEACH FL 33445

Title            DIRECTOR  
Name            GEEENBERG, ALAN  
Address        C/O WILSON MANAGEMENT  
                  1300 NW 17TH AVE STE 270  
City-State-Zip: DELRAY BEACH FL 33445

*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: BONNIE LEFKOWITZ**

**PRESIDENT**

**01/24/2025**

Electronic Signature of Signing Officer/Director Detail

Date