## 2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 742038** 

Entity Name: FLANDERS S ASSOCIATION, INC.

**FILED** Jul 18, 2024 **Secretary of State** 4346723670CC

## **Current Principal Place of Business:**

C/O PHOENIX MANAGEMENT SERVICES 6131B LAKE WORTH RD GREENACRES, FL 33461

## **Current Mailing Address:**

6131B LAKE WORTH RD. LAKE WORTH. FL 33463 US

FEI Number: 59-1828981 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KASSOWER, MICHAEL C/O FRANK, WEINBERG & BLACK 1875 CORPORATE BLVD BOCA RATON, FL 33431 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 KASSOWER 07/18/2024

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

**PRESIDENT** Title VΡ Title

TURSCHMANN, CYNTHIA Name Name LEVITON, FRANK

C/O PHOENIX MANAGEMENT C/O PHOENIX MANAGEMENT Address Address

**SERVICES SERVICES** 

6131B LAKE WORTH RD 6131B LAKE WORTH RD

City-State-Zip: GREENACRES FL 33463 City-State-Zip: GREENACRES FL 33463

Title **TREASURER** Title **SECRETARY** 

TURSCHMANN, CYNTHIA STEIER, KELLY ILENE Name Name

Address C/O PHOENIX MANAGEMENT Address C/O PHOENIX MANAGEMENT SERVICES

**SERVICES** 

6131B LAKE WORTH RD 6131B LAKE WORTH RD.

City-State-Zip: GREENACRES FL 33461 City-State-Zip: GREENACRES FL 33463

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.