

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720965

FILED
Apr 29, 2024
Secretary of State
0501996960CC

Entity Name: PARK ACRES ESTATES ASSOCIATION, INC.

Current Principal Place of Business:

RESCOM MANAGEMENT LLC
3639 CORTEZ RD W SUITE 120
BRADENTON, FL 34210

Current Mailing Address:

RESCOM MANAGEMENT LLC
3639 CORTEZ RD W SUITE 120
BRADENTON, FL 34210 US

FEI Number: 59-1448997

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KENYON, MICHAEL
RESCOM MANAGEMENT LLC
3639 CORTEZ RD W SUITE 120
BRADENTON, FL 34210 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 KENYON

04/29/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name BEAUDRY, MARC
Address RESCOM MANAGEMENT LLC
 3639 CORTEZ RD W SUITE 120
City-State-Zip: BRADENTON FL 34210

Title DIRECTOR
Name BOEHME, CARLA
Address RESCOM MANAGEMENT LLC
 3639 CORTEZ RD W SUITE 120
City-State-Zip: BRADENTON FL 34210

Title PRESIDENT
Name HOPPER, TOM
Address RESCOM MANAGEMENT LLC
 3639 CORTEZ RD W SUITE 120
City-State-Zip: BRADENTON FL 34210

Title SECRETARY
Name BRANDT, LAURA
Address RESCOM MANAGEMENT LLC
 3639 CORTEZ RD W SUITE 120
City-State-Zip: BRADENTON FL 34210

Title DIRECTOR
Name DAUGHERTY, ROBERT
Address RESCOM MANAGEMENT LLC
 3639 CORTEZ RD W SUITE 120
City-State-Zip: BRADENTON FL 34210

Title DIRECTOR
Name MARTIN, GARY
Address RESCOM MANAGEMENT LLC
 3639 CORTEZ RD W SUITE 120
City-State-Zip: BRADENTON FL 34210

Title VP
Name SHEEHAN, DAN
Address RESCOM MANAGEMENT LLC
 3639 CORTEZ RD W SUITE 120
City-State-Zip: BRADENTON FL 34210

Title PROPERTY MANAGER
Name KENYON, MICHAEL
Address RESCOM MANAGEMENT LLC
 3639 CORTEZ RD W SUITE 120
City-State-Zip: BRADENTON FL 34210

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: MICHAEL KENYON

MANAGER

04/29/2024

Electronic Signature of Signing Officer/Director Detail

Date