

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 720965

**FILED**  
**Apr 25, 2016**  
**Secretary of State**  
**CC0656075812**

**Entity Name:** PARK ACRES ESTATES ASSOCIATION, INC.

**Current Principal Place of Business:**

PARK ACRES ESTATES ASSOC.  
4802 PARK ACRES DR  
BRADENTON, FL 34207-2170

**Current Mailing Address:**

PARK ACRES ESTATES ASSOC.  
4802 PARK ACRES DR  
BRADENTON, FL 34207-2170 US

**FEI Number:** 59-1448997

**Certificate of Status Desired:** No

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

GALLAGHER, PATRICK A  
PARK ACRES ESTATES ASSOC.  
4802 PARK ACRES DR  
BRADENTON, FL 34207-2170 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:** PATRICK A GALLAGHER

04/25/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            GALLAGHER, PATRICK  
Address        3409 48TH ST W  
City-State-Zip: BRADENTON FL 34209

Title            TREASURER  
Name            GRENIER, ELAINE  
Address        628 PARK CIRCLE  
City-State-Zip: BRADENTON FL 34207

Title            SECRETARY  
Name            FITZGERALD, ANNA S  
Address        4617 PARK ACRES DRIVE  
City-State-Zip: BRADENTON FL 34207

Title            SECRETARY  
Name            PETERS, JANIS  
Address        637 PARK CIR.  
City-State-Zip: BRADENTON FL 34207

Title            DIRECTOR  
Name            IMES, LYNN  
Address        663 PARK CIR.  
City-State-Zip: BRADENTON FL 34207

Title            DIRECTOR  
Name            MCCOY, MARY  
Address        514 47TH AVE DR W  
City-State-Zip: BRADENTON FL 34207

Title            DIRECTOR  
Name            INDOVINA, PHILIP J  
Address        645 PARK CIRCLE  
City-State-Zip: BRADENTON FL 34207

*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:** PATRICK A GALLAGHER

**PRESIDENT**

04/25/2016

Electronic Signature of Signing Officer/Director Detail

Date