

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 766430

**Entity Name:** DESOTO PLACE PARK, INC.**Current Principal Place of Business:**9031 TOWN CENTER PARKWAY  
BRADENTON, FL 34202**Current Mailing Address:**9031 TOWN CENTER PKWY  
BRADENTON, FL 34202 US**FEI Number:** 59-2366248**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ADVANCED MANAGEMENT OF SW FL, INC.  
9031 TOWN CENTER PKWY  
BRADENTON, FL 34202 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            TRUMAN, SHEILA  
Address        9031 TOWN CENTER PARKWAY  
City-State-Zip: BRADENTON FL 34202

Title            VP  
Name            WILLIAMS, DAVID D  
Address        9031 TOWN CENTER PARKWAY  
City-State-Zip: BRADENTON FL 34202

Title            SECRETARY  
Name            RUIZ, JACKIE  
Address        9031 TOWN CENTER PARKWAY  
City-State-Zip: BRADENTON FL 34202

Title            DIRECTOR  
Name            BULL, NANCY  
Address        9031 TOWN CENTER PARKWAY  
City-State-Zip: BRADENTON FL 34202

Title            AS  
Name            WILSON, MATHEW D  
Address        9031 TOWN CENTER PARKWAY  
City-State-Zip: BRADENTON FL 34202

Title            DIRECTOR  
Name            VANDENHUEVEL, JEANNE  
Address        9031 TOWN CENTER PARKWAY  
City-State-Zip: BRADENTON FL 34202

Title            DIRECTOR  
Name            BRISON, LINDA  
Address        9031 TOWN CENTER PARKWAY  
City-State-Zip: BRADENTON FL 34202

Title            DIRECTOR  
Name            CAPONI, LOUIS  
Address        9031 TOWN CENTER PARKWAY  
City-State-Zip: BRADENTON FL 34202

**Continues on page 2**

*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: MATHEW WILSON****AS****02/15/2024**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                 DIRECTOR  
Name                ROSE, BOB  
Address             9031 TOWN CENTER PARKWAY  
City-State-Zip:    BRADENTON FL 34202

Title                 TREASURER  
Name                HANSON, JEAN  
Address             9031 TOWN CENTER PKWY  
City-State-Zip:    BRADENTON FL 34202