

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007988

Entity Name: ACORN PARKE HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 20, 2023
Secretary of State
5721842352CC

Current Principal Place of Business:

1011 3RD ST N
C/O LIFESTYLES PROPERTY SERVICES
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

1011 3RD ST N
C/O LIFESTYLES PROPERTY SERVICES
JACKSONVILLE BEACH, FL 32250 US

FEI Number: 59-3756754

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIFESTYLES PROPERTY SERVICES, LLC
1011 3RD ST N
JACKSONVILLE BEACH, FL 32250 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: DANIEL LUCKETT

04/20/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name HICKS, IVOR
Address 1011 3RD ST N
 C/O LIFESTYLES PROPERTY
 SERVICES
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title VP, DIRECTOR
Name DANIELS, CHARLIE
Address 1011 3RD ST N
 C/O LIFESTYLES PROPERTY
 SERVICES
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title TREASURER, DIRECTOR
Name BUSH, YOLANDA
Address 1011 3RD ST N
 C/O LIFESTYLES PROPERTY
 SERVICES
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR
Name ALSTON, BERNADETTE
Address 1011 3RD ST N
 C/O LIFESTYLES PROPERTY
 SERVICES
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR
Name BLANDING, CHARLOTTE
Address 1011 3RD ST N
 C/O LIFESTYLES PROPERTY
 SERVICES
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR
Name MATTHEWS, CORNELIUS
Address 1011 3RD ST N
 C/O LIFESTYLES PROPERTY
 SERVICES
City-State-Zip: JACKSONVILLE BEACH FL 32250

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: IVOR HICKS

PRESIDENT

04/20/2023

Electronic Signature of Signing Officer/Director Detail

Date