

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007988

Entity Name: ACORN PARKE HOMEOWNERS ASSOCIATION, INC.**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

04/14/2024

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	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, SECRETARY
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 V HICKS

PRESIDENT

04/14/2024

Electronic Signature of Signing Officer/Director Detail

Date