

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007988

Entity Name: ACORN PARKE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**10592 BALMORAL CIRCLE EAST
SUITE# 7
JACKSONVILLE, FL 32218**Current Mailing Address:**10592 BALMORAL CIRCLE EAST
SUITE# 7
JACKSONVILLE, FL 32218 US**FEI Number:** 59-3756754**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LONG, JAMES
J&L MANAGEMENT OF NORTH FLORIDA, INC
10592 BALMORAL CIRCLE EAST STE 7
JACKSONVILLE, FL 32218 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	SECRETARY, TREASURER, DIRECTOR
Name	COLEMAN, PORTIA
Address	1410 PALM COAST PARKWAY NW
City-State-Zip:	PALM COAST FL 32137

Title	PRESIDENT
Name	GARY, ANTIONE
Address	1410 PALM COAST PARKWAY NW
City-State-Zip:	PALM COAST FL 32137

Title	D, VP
Name	MATTHEWS, CORNELIUS
Address	1410 PALM COAST PARKWAY NW
City-State-Zip:	PALM COAST FL 32137

Title	OTHER, MANAGER
Name	J&L MANAGEMENT OF NORTH FLORIDA, INC.
Address	10592 BALMORAL CIRCLE EAST SUITE# 7
City-State-Zip:	JACKSONVILLE FL 32218

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: J&L MANAGEMENT OF NORTH FLORIDA, INC.**MANAGER****01/22/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date