

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05137

Entity Name: THE PROPERTY OWNERS ASSOCIATION OF LAKE PARKER ESTATES, INC.

Current Principal Place of Business:

5207 TROUBLE CREEK ROAD
NEW PORT RICHEY, FL 34652

Current Mailing Address:

5207 TROUBLE CREEK ROAD
NEW PORT RICHEY, FL 34652 US

FEI Number: 59-2927270

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT SERVICES, INC.
5207 TROUBLE CREEK ROAD
NEW PORT RICHEY, FL 34652 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, DIRECTOR
Name PORRECA, JOHN
Address 5207 TROUBLE CREEK ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

Title TREASURER, DIRECTOR
Name HINKLE, TROY
Address 5207 TROUBLE CREEK ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

Title VP, DIRECTOR
Name YOUNG, BRAD
Address 5207 TROUBLE CREEK ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

Title SECRETARY, DIRECTOR
Name RABIN, KIMBERLY
Address 5207 TROUBLE CREEK ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

Title DIRECTOR
Name JOHNSON, NEAL
Address 5207 TROUBLE CREEK ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

Title DIRECTOR
Name COLE, BETH
Address 5207 TROUBLE CREEK ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

Title DIRECTOR
Name CRAIG, BECCA
Address 5207 TROUBLE CREEK ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

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: JOHN PORRECA

PRESIDENT

04/20/2024

Electronic Signature of Signing Officer/Director Detail

Date