

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

DOCUMENT# N14000004851

**Entity Name:** PARK RESIDENCES OF LIDO KEY CONDOMINIUM  
ASSOCIATION, INC.

**Current Principal Place of Business:**

129 & 159 TAFT DRIVE  
LIDO KEY, FL 34236

**Current Mailing Address:**

C/O PROCARE ASSOCIATION MANAGEMENT INC  
6289 LAKE OSPREY DR.  
SARASOTA, FL 34240 US

**FEI Number:** 81-1952917

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PROCARE ASSOCIATION MANAGEMENT INC  
6289 LAKE OSPREY DR.  
SARASOTA, FL 34240 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:** HASAN JOHN YILMAZ

02/06/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name           CITRON, SUSAN  
Address        129 TAFT DRIVE  
City-State-Zip: SARASOTA FL 34236

Title            TREASURER  
Name           BERGER, ADAM  
Address        129 TAFT DRIVE  
City-State-Zip: SARASOTA FL 34236

Title            SECRETARY  
Name           LARUE, LAURA  
Address        129 TAFT DR.  
City-State-Zip: SARASOTA FL 34236

Title            DIRECTOR  
Name           ROWLEY , RICHARD  
Address        129 TAFT  
City-State-Zip: LIDO KEY FL 34236

*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:** SUSAN CITRON

**PRESIDENT**

02/06/2024

Electronic Signature of Signing Officer/Director Detail

Date