

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29305

Entity Name: JET PARK MOBILE HOME OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**506 5TH AVE WEST
PALMETTO, FL 34221**Current Mailing Address:**506 5TH AVE W.
PALMETTO, FL 34221 US**FEI Number: 59-2661645****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**KIRKLAND, W NELON
1206 MANATEE AVE W
BRADENTON, FL 34205 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
Name	PEPERA, KEVIN
Address	506 5TH AVENUE WEST
City-State-Zip:	PALMETTO FL 34221

Title	SECRETARY
Name	KLUG, DEB
Address	506 5TH AVE WEST
City-State-Zip:	PALMETTO FL 34221

Title	DIRECTOR
Name	ADAMOWICZ, DAVE
Address	506 5TH AVE WEST
City-State-Zip:	PALMETTO FL 34221

Title	VP
Name	ORENGIA, DALE
Address	506 5TH AVENUE WEST
City-State-Zip:	PALMETTO FL 34221

Title	DIRECTOR
Name	BUSCH, BARB
Address	506 5TH AVENUE WEST
City-State-Zip:	PALMETTO FL 34221

Title	TREASURER
Name	RUHANA, LEO
Address	506 5TH AVENUE WEST
City-State-Zip:	PALMETTO FL 34221

Title	DIRECTOR
Name	CARROLL, JAMES
Address	506 5TH AVENUE WEST
City-State-Zip:	PALMETTO, FL 34221

Title	OFFICE MANAGER
Name	WALSH, DAWN
Address	506 5TH AVENUE WEST
City-State-Zip:	PALMETTO FL 34221

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: KEVIN PEPERA**PRESIDENT****02/20/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date