## 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000035219

Entity Name: CHARLES PERRY PARTNERS, INC.

**Current Principal Place of Business:** 

8200 N.W. 15TH PLACE GAINESVILLE, FL 32606

**Current Mailing Address:** 

8200 N.W. 15TH PLACE GAINESVILLE, FL 32606

FEI Number: 45-1601307 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BUTTS, ROBERT P. ESQ. FISHER, BUTTS, SECHREST & WARNER, P.A. 5200 S.W. 91ST TERRACE, SUITE 101 GAINESVILLE, FL 32608 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: ROBERT P. BUTTS 01/04/2024

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

**PRESIDENT** Title Title **CHAIRMAN** 

LESLIE. BRIAN K Name Name WEINGART, BRECK A MR. Address 8200 N.W. 15TH PLACE Address 8200 N.W. 15TH PLACE GAINESVILLE FL 32606 City-State-Zip: City-State-Zip: GAINESVILLE FL 32606

Title **SECRETARY** Title **TREASURER** 

Name MORESCHI, VINCENT MORGAN, JASON Name Address 8200 N.W. 15TH PLACE Address 8200 N.W. 15TH PLACE GAINESVILLE FL 32606 City-State-Zip: City-State-Zip: GAINESVILLE FL 32606

Title **CFO** 

Name PRESSLEY, RALPH Address 8200 N.W. 15TH PLACE City-State-Zip: GAINESVILLE FL 32606

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN LESLIE

Electronic Signature of Signing Officer/Director Detail

**FILED** Jan 04, 2024

**Secretary of State** 

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