

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000008577

**Entity Name:** ALDEN PARKES, LLC

**Current Principal Place of Business:**

10901 BURNT MILL ROAD  
#204  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

P.O. BOX 551618  
JACKSONVILLE, FL 32255-1618 US

**FEI Number:** 20-2287972

**Certificate of Status Desired:** No

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

MCARDLE, KHRYS  
10901 BURNT MILL ROAD  
#204  
JACKSONVILLE, FL 32256 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:** KHRYS MCARDLE

**03/18/2024**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MR.  
Name MCARDLE, KHRYS R  
Address 10901 BURNT MILL ROAD  
#204  
City-State-Zip: JACKSONVILLE FL 32256

Title MRS.  
Name MCARDLE, LYNNE D  
Address 10901 BURNT MILL ROAD  
#204  
City-State-Zip: JACKSONVILLE FL 32256

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KHRYS MCARDLE

**OFFICER**

**03/18/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date