

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M20000011916

Entity Name: FLEETPARK PICKETTVILLE FL LLC

Current Principal Place of Business:

2200 ABBOTT DR.
CARTER LAKE, IA 51510

Current Mailing Address:

2200 ABBOTT DR.
CARTER LAKE, IA 51510 US

FEI Number: 85-3247057

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Authorized Person(s) Detail :

Title CHIEF MANAGER
Name HOOVESTOL, WAYNE
Address 2200 ABBOTT DR.
City-State-Zip: CARTER LAKE IA 51510

Title CHIEF FINANCIAL MANAGER
Name JAMES, MIKE
Address 2200 ABBOTT DR.
City-State-Zip: CARTER LAKE IA 51510

Title AUTHORIZED PERSON
Name KAI, LAURA
Address 2200 ABBOTT DR.
City-State-Zip: CARTER LAKE IA 51510

Title ASSISTANT CHIEF MANAGER
Name HOOVESTOL, JOE
Address 2200 ABBOTT DR.
City-State-Zip: CARTER LAKE IA 51510

Title SECRETARY
Name HEIT, HANNA
Address 2200 ABBOTT DR.
City-State-Zip: CARTER LAKE IA 51510

Title CHIEF FINANCIAL OFFICER
Name LUCHT, ANDY
Address 2200 ABBOTT DR.
City-State-Zip: CARTER LAKE IA 51510

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: LAURA KAI

AUTHORIZED PERSON

05/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date