2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 11, 2008 8:00 am Secretary of State

02-11-2008 90061 010 ****61.25

DOCUMENT # 720965

1. Entity Name PARK ACRES ESTATES ASSOCIATION, INC.



dunes.

Principal Place of Business

Mailing Address

4802 PARK /	ESTATES ASSOC. ACRES DR , FL <u>34207-21</u> 70 US	4802 PARK /	PARK AURES ESTATES ASSOC. 4802 PARK ACRES DR BRADENTON, FL 34207-2170 US				1851 85812 61811 81811 8181	
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Add	ress					
Suite, Apt. #, etc.		Suite, Apt.	Suite, Apt. #, etc.			Chg-NP CR	R2E037 (12/06)	
City & State		City & State	City & State			997	<u> </u>	plied For t Applicable
Zip	Country	Zip		Country -	5. Certificate o	of Status Desired	\$9.75	itional
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
LUECKE, THOMAS 4911 14TH ST. W. STE 103			•	Name Street Address (P.O. Box Number is Not Acceptable)				
BRADENTON, FL 34207								
	J.,, v. = 0.120.			City		*	FL Zip Code	9
8. 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. I am familiar with, and accept								
the obligat	ions of registered agent.							
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
	Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees		check payable to Department of St	
10. OFFICERS AND DIRECTOR			1	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			10
TITLE	P		Delete T	TITLE			Change	☐ Addition
NAME	DEXTER, JOSEPH		ħ	NAME				
STREET ADDRESS	4607 PARK ACRES DR.			STREET ADDRESS				
CITY-ST-ZIP	BRADENTON, FL 34207		0	CETY-ST-ZIP				
TITLE	D		Delete 1	TITLE			☐ Change	☐ Addition
NAME	MANGIONE, ALFONSO						L_ Change	
_STREET_ADDRESS_	L			NAME			change	
	667_PARK_CIR			STREET, ADDRESS				
CITY-ST-ZIP	BRADENTON, FL 34207		2	STREET ADDRESS City-St-Zip		<u> </u>		
TITLE	BRADENTON, FL 34207			STREET ADDRESS CITY-ST-ZIP TITLE	 · 		Change	Addition
TITLE NAME	BRADENTON, FL 34207 T LASS, CHARLES		Delete T	STREET ADDRESS CITY-ST-ZIP TITLE NAME		_ =		Addition
TITLE NAME STREET ADDRESS	BRADENTON, FL 34207 T LASS, CHARLES 510 47TH AVE.		Delete T	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS				Addition
TITLE NAME	BRADENTON, FL 34207 T LASS, CHARLES 510 47TH AVE. BRADENTON, FL 34207		Delete 1	STREET, ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	BRADENTON, FL 34207 T LASS, CHARLES 510 47TH AVE. BRADENTON, FL 34207 VP		Delete 1 Delete 1 Delete 1	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		· · ·		Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	BRADENTON, FL 34207 T LASS, CHARLES 510 47TH AVE. BRADENTON, FL 34207 VP BUTLER, DONALD 629 PARK CIRCLE		Delete 1 Delete 1 Delete 5 C	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			☐ Change	
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all officer like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR