

**2023 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A30140

**Entity Name:** SUMMER GLEN OF IMMOKALEE, LTD.

**Current Principal Place of Business:**

7865 SOUTHSIDE BLVD  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

7865 SOUTHSIDE BLVD  
JACKSONVILLE, FL 32256

**FEI Number:** 59-3009333

**Certificate of Status Desired:** Yes

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

SELIGMAN, KAREN J  
7865 SOUTHSIDE BLVD  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**General Partner Detail :**

Document #  
Name DAVIS, RONNIE C.  
Address 7865 SOUTHSIDE BLVD  
City-State-Zip: JACKSONVILLE FL 32256

Document #  
Name SELIGMAN, SANFORD L.  
Address 13924 MESSINA LOOP  
City-State-Zip: LAKEWOOD RANCH FL 34211

*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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SANFORD L. SELIGMAN

**GP**

**02/01/2023**

\_\_\_\_\_  
Electronic Signature of Signing General Partner Detail

\_\_\_\_\_  
Date